

Major Incident Report form (S&S-40)

Overview

The Major Incident Report form (S&S-40) is designed to capture detailed information on the most severe safety and security incidents occurring in the transit environment. Detailed data, available from sources such as accident, incident, or police reports, are used to complete the Major Incident Report form (S&S-40). The information required on the form is intended to be of a level that can be collected at or near the time of the incident occurrence.

If your agency has had no major incidents for the reporting period for a particular [mode](#) and [type of service](#) (TOS), select the Non-Major Summary Report form (S&S-50) for that mode and type of service (TOS) and check the **No Major Incident Data to Report** box.

Reporting Requirement and Thresholds

Agencies must complete one Major Incident Report form (S&S-40) for each [major incident](#) (safety or security incidents) occurring during the reporting period. However, commuter rail (CR) operators are only required to report security incidents to NTD. Commuter rail (CR) operators are currently required to report safety incidents to the Federal Railroad Administration.

Major Incident Reporting forms (S&S-40) are due thirty days after the major incident occurred.

What Has Changed from Prior Year

There are no changes to the Major Incident Report form (S&S-40) for RY 2007. However, the definition of a fatality has been clarified.

Approach

Both safety and security occurrences are reported on the Major Incident Report form (S&S-40). For an incident to be reportable on this form, it must be a major incident.

Major Incident

A [major incident](#) is an event that involves a transit vehicle or occurs on transit-controlled property and meets one or more of the following conditions:

1. Involves a transit vehicle or occurring on transit-controlled property
2. Two or more [injuries](#) requiring immediate medical attention away from the scene of the incident
3. A [fatality](#) due to an incident. This does not include suicides, deaths by natural causes, or deaths not associated with an incident.
4. [Property damage](#) equal to or exceeding \$25,000 (equal to or exceeding \$7,500 for a collision at grade crossing)
5. An [evacuation](#) of a revenue vehicle due to life safety reasons
6. A [collision](#) at [grade crossing](#) resulting in at least one injury requiring immediate medical attention away from the scene or property damage equal to or exceeding \$7,500
7. A [mainline derailment](#)
8. A [collision with person\(s\)](#) on a rail right-of-way (ROW) resulting in at least one injury requiring immediate medical attention away from the scene for at least one person
9. A [collision involving a rail transit vehicle](#) resulting in at least one injury requiring immediate medical attention away from the scene for at least one person
10. [Forcible rape](#)
11. Confirmed terrorist / security events:
 - [Bombing](#) (suicide or other)
 - [Chemical / biological / radiological / other release](#)
 - [Cyber incident](#)

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- [Hijacking](#)
- [Sabotage](#).

Only one form is completed per incident regardless of how many of the major incident threshold conditions are met. If, for example, an incident results in a mainline derailment, and property damage is equal to or exceeds \$25,000, only one Major Incident Report form (S&S-40) is completed, even though two of the above criteria have been met.

The following paragraphs highlight the important aspects of each major incident threshold condition.

Fatality Due to an Incident

Safety and security incidents resulting in fatalities are reported on the Major Incident Report form (S&S-40).

For NTD purposes a [fatality](#) is a transit-caused death, confirmed within 30 days of a transit incident, which occurs under the collision, derailment, fire, evacuation, security incident, vehicle leaving the roadway, or not otherwise classified categories.

There are two exceptions to this rule:

1. Suicides are not reported on this form; all suicides are reported on the Non-Major Summary Report form (S&S-50).
2. Deaths resulting from illnesses or other natural causes, or otherwise not associated with an incident, are not reported on either incident form. For example, if a person in a rail facility sustains a fatal heart attack, this event would not be reported to NTD.

Example 5 — Fatality

Example: A passenger fires a weapon on a transit vehicle, killing one passenger.

Solution: Complete a Major Incident Report form (S&S-40) since a fatality occurred that was not a suicide or a death resulting from illness.

Two or More Injuries Requiring Medical Attention

For NTD reporting purposes an [injury](#) requires immediate medical attention away from the scene of the incident. Immediate medical attention includes transport to the hospital by ambulance. It also includes transport immediately from the incident scene to a hospital or physician's office by another type of emergency vehicle, by passenger vehicle, or through other means of transport.

Immediate medical attention means that medical attention was sought without delay after the incident occurred. An individual seeking medical care several hours after an incident or in the days following an incident is not considered to have received immediate medical attention.

The medical attention received must be at a location other than the location at which the incident occurred. The intent of this distinction is to exclude incidents that only require minor first aid or other assistance received at the scene.

This distinction is not, however, intended to be burdensome for the transit agency. It is not a requirement that an agency follow-up on each person transported by ambulance, for example, to ensure that they actually received medical attention at the hospital. It is acceptable to count each person immediately transported by ambulance as an injury.

Both safety and security incidents (the results of accidents and [homicides](#), for example) resulting in two or more [injuries](#) or at least one fatality are reported using the Major Incident Report form (S&S-40). As with [fatalities](#), however, injuries resulting from illnesses should not be reported in any section of the NTD. For example, if a passenger on a [demand response](#) (DR) vehicle is transported to the hospital following a seizure on the demand response (DR) vehicle this is not a reportable incident.

Example 6 — Two or More Injuries Reporting

Example: Transported by Ambulance

An ambulance transports three passengers who were hurt in a collision from the site of the accident.

Solution: Complete a Major Incident Report form (S&S-40) since two or more passengers required immediate medical attention away from the scene.

Example: Transported by Alternate Means

Three passengers are hurt in a collision. Rather than wait for an ambulance to arrive, a security guard drives them to a nearby hospital.

Solution: Complete a Major Incident Report form (S&S-40) since two or more passengers required immediate medical attention away from the scene.

Example: Incidents not Qualifying as an Injury

Three passengers are hurt in a collision. Each sees a physician the next day and subsequently submits a claim to the transit agency.

Solution: Do not report the incident on a Major Incident Report form (S&S-40) or any other NTD safety and security form (unless some other factor associated with the incident other than these injuries requires the completion of a Major Incident Report form (S&S-40) — e.g., a fatality). This is because none of the passengers sought immediate medical attention away from the scene.

\$25,000 Total Incident Damage

Incidents involving [property damage](#) equal to or exceeding \$25,000 require the completion of a Major Incident Report form (S&S-40). Property damage includes but is not limited to the following:

- Transit and non-transit vehicle damage
- Stations as well as non-transit facilities
- Rights-of-way (ROW) and items surrounding rights-of-way (ROW), such as utility poles.

The key points regarding estimated property damage are:

- Estimated damage does not only include transit property damage, but also damage to other vehicles and property (other than personal property) involved in the incident and not owned by the transit agency.
- The amount paid (or an estimate made for insurance purposes) is reported for property damage. In the case where replacement is necessary, the depreciated replacement cost is reported.
- The cost of clearing wreckage or damage to non-transit agency property is also included in the property damage value.
- The cost of an accident or a criminal investigation is not included in the estimated property damage.
- Damage to personal property, such as the value of laptops, cell phones, or other personal property items damaged or destroyed in an incident are not included in the estimated property damage.

Example 7 — Calculating Property Damage

Example: A bus collides with a passenger car. The passenger car is totaled; the bus incurred body damage. The car has an estimated value of \$15,000 (transit agency uses the car's blue book value or other reasonable estimate of present value). The cost of the body damage is estimated at \$12,000.

Solution: Property damage = \$27,000 (\$15,000 + \$12,000).

Evacuation Due to a Life Safety Event

All [evacuations](#) of revenue vehicles that result from [life safety events](#) require the completion of a Major Incident Report form (S&S-40). A life safety event is an imminent danger to people on the [revenue vehicle](#). Examples of life safety events include [fires](#), the presence of smoke, fuel leaks, and electrical hazards. Evacuations of vehicles, and not evacuations of facilities, are reportable to NTD. Evacuations due to operational issues are not reportable.

Example 8 — Evacuation

Example: A Bus (BU) is evacuated because of a compressed natural gas (CNG) leak on the vehicle. No one is injured.

Solution: Complete a Major Incident Report form (S&S-40) because the evacuation was due to a life safety event — the CNG leak.

The requirement that a reportable incident involves a life safety event is intended to capture events that pose serious threats to those in the transit environment, rather than operations related events. For example, a situation requiring that transit passengers leave a vehicle due to a flammable fuel leak or due to a passenger firing a weapon on a vehicle is reported on Major Incident Report form (S&S-40). A situation requiring that passengers be transferred from one transit vehicle to another due to a service breakdown is not reported on Major Incident Report form (S&S-40).

Collision at a Grade Crossing Resulting in Injury or Property Damage

[Collisions](#) at [grade crossings](#) resulting in at least one injury requiring immediate medical attention away from the scene or property damage equal to or exceeding \$7,500 are reported on the Major Incident Report form (S&S-40).

Example 9 — Collision at Grade Crossing Reporting

Example: At Grade Crossing

A collision at a grade crossing involving a light rail (LR) vehicle injures one passenger who is transported to a hospital via ambulance.

Solution: Complete a Major Incident Report form (S&S-40) because the collision at grade crossing resulted in an injury requiring immediate medical attention away from the scene of the incident.

A Mainline Derailment

All [derailments](#) occurring on [mainline](#) track are reported using the Major Incident Report form (S&S-40). The mainline track is the primary rail over which rail transit vehicles travel between stations. It does not include yard and siding track. This threshold applies only to rail incidents (other than commuter rail (CR)).

Derailments occurring in yards or on other non-mainline track are reported on the Non-Major Summary Report form (S&S-50) if they meet the threshold criteria for non-major incidents. These criteria are covered in the discussion of the Non-Major Summary Report form (S&S-50).

Right-of-Way (ROW) Collision with Person

This threshold applies only to rail incidents (other than commuter rail (CR)). All [rail collisions with persons](#) occurring on mainline track (rail vehicle striking an individual) that result in [injuries](#) requiring immediate medical attention away from the scene for one or more persons are reportable as major incidents.

Right-of-Way (ROW) Collision with Transit Vehicle

This threshold applies only to rail incidents (other than commuter rail (CR)). All [rail \(transit\) collisions with transit vehicles](#) occurring on mainline track that result in injuries requiring immediate medical attention away from the scene for one or more persons are reportable as major incidents. This category of events includes collisions between rail transit vehicles and other transit vehicles including:

- Revenue and non-revenue rail transit vehicles
- Revenue and non-revenue non-rail transit vehicles.

Home	e-File	Annual	Safety & Security	Reports	Communications	Sys Admin	Help	
Form Name: Major Incident Report form (S&S-40) Mode: Rail Service:								Close Form
Incident Num: Update User: Update Date: Submit Date: Revision:								
1 Mode / Service: <input type="text" value="Select"/>								
2 Date and Time of Incident								
Month* <input type="text" value="Select"/> Day* <input type="text" value="Select"/> Year* <input type="text" value="Select"/> Hour* <input type="text" value="Select"/> Minutes* <input type="text" value="Select"/> AM/PM* <input type="text" value="Select"/> Time Zone* <input type="text" value="Select"/>								
3 Incident Location								
City* <input type="text"/> State* <input type="text"/> Longitude <input type="text"/> <input type="text" value="Select"/> Latitude <input type="text"/>								
Incident Categorization 4 Primary Event (Select one - appropriate detail screen will appear below)*								
<input type="checkbox"/> a Collision <input type="checkbox"/> b Security incident <input type="checkbox"/> c Derailment <input type="checkbox"/> d Evacuation <input type="checkbox"/> e Fire <input type="checkbox"/> g Fatalities / Injuries not otherwise classified (NOC)								
5 Secondary Events (Select all that apply - appropriate detail screen will appear below)								
<input type="checkbox"/> a Collision <input type="checkbox"/> b Derailment <input type="checkbox"/> c Evacuation <input checked="" type="checkbox"/> d Fire								
Additional Detail (complete if applicable)								
6 Rail Alignment Type <input type="text" value="Make Selection"/>								
7 Grade Crossing Control <input type="text" value="Make Selection"/>								
8 Intersection Controls <input type="text" value="Make Selection"/>								
Describe Other* <input type="text"/>								
Environmental Conditions								
9 Weather <input type="text" value="Make Selection"/>								
10 Traffic <input type="text" value="Make Selection"/>								
12 Right-of-way (ROW) / Roadway Conditions <input type="text" value="Make Selection"/>								
13 Right-of-way (ROW) / Roadway Configuration <input type="text" value="Make Selection"/>								
14 Right-of-way (ROW) / Roadway Type <input type="text" value="Make Selection"/>								
Describe Other* <input type="text"/>								
15 Vehicles Involved <input type="button" value="Add Vehicle"/>								
Vehicle 1 type* <input type="text" value="Make Selection"/> Vehicle 1 action* <input type="text" value="Make Selection"/> Delete <input type="checkbox"/>								
Vehicle 1 manufacturer* <input type="text" value="Make Selection"/>								
Describe Other* <input type="text"/>								

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16 Pedestrians Involved

Add Pedestrian

Pedestrian 1*

Gender*

Select

Age range*

Select

Pedestrian 1 Action*

Make Selection

Delete☐

Describe Other *

17 Other Relevant Incident Information not Provided Elsewhere on this Form

Incident Primary and Secondary Event Summary

	a	b	c	d	e	f
	Transit Passengers	Transit Facility Occupants	Transit Employees	Other Workers	Trespassers	Other
18 Fatalities						
19 Injuries						
20 Total Estimated Property Damage \$						

21 Contact Information for Person Reporting Incident

Name*

Phone*

Title*

Email*

Save

Close

Submit Report

Print

Delete

Detailed Instructions

The detailed instructions are provided for the three Major Incident Reporting forms:

1. Rail modes
2. Non-rail modes (excluding Ferryboat (FB))
3. Ferryboat (FB).

Detailed Instructions for Rail Modes

This section describes in detail how to generate and complete the Major Incident Report form (S&S-40) Rail.

At the bottom of the Safety and Security tab click on the **Add Major Incident** button, this will take you to the Add Major Incident screen.

From the **Drop-Down** list select the mode / type of service for which you would like to report a major incident.

Click on the **Generate Form** button one time only for each form you wish to generate.

The software will return you to the **Safety and Security** tab screen and the new Major Incident form (S&S-40) will be listed and highlighted.

To begin entering data, click on the new Major Incident form (S&S-40) for the appropriate mode and type of service to open the form.

As the form is being completed, changes should be saved by clicking the **Save** button frequently. When all data have been entered into the form and verified for accuracy, to submit the form to the Federal Transit Administration (FTA) click the **Submit Report** button. To close the form, click the **Close** button. Reports that are saved will appear in the list of current forms in the **Safety and Security** screen. To delete a form click the **Delete Report** button.

If the reporter wishes to amend a report after it has already been submitted (for example, if further data is obtained after form submission or the agency discovers an error in form content), open the Major Incident Report form (S&S-40) Rail, make

changes to the form needed and click on the **Submit Report** button. The revised form will be designated as Revision 1. Further revisions will be designated as 2, 3, 4, etc.

Fields marked with an asterisk (*) on the screen are mandatory, indicating that the forms cannot be saved or submitted unless these fields are complete. Please complete all of the fields that apply to the incident, however, whether marked with an asterisk or not.

Some information at the top of the Major Incident Report form (S&S-40) Rail is pre-filled or captured when data are entered and saved on the form. Three data fields are pre-filled:

1. NTD ID number — the NTD identification number (NTD ID) is the four-digit number FTA assigned to your transit agency. Review to ensure your NTD ID is correct. Contact your NTD analyst immediately if there is a problem.
2. Agency name — legal name of the transit agency as entered in the NTD Urbanized Area Report.
3. Mode / type of service – determined when the form was generated.

Four data fields are captured when data are entered and saved on the form:

1. Update user — identifies the user identification of the reporter entering or modifying the data
2. Update date — identifies the date of entry or modification
3. Submit date — if this report has been previously submitted, identifies the date this action was performed
4. Revision number — the revision number of a Major Incident Report form (S&S-40) will be 0 (zero) the first time it is submitted. Each time the form is revised and resubmitted, the revision number is incremented by one.

Mode and Type of Service (TOS)

The mode and type of service (TOS) are determined when form was generated. This cannot be edited.

Date and Time of Incident

Report the date and time the incident occurred using the **Drop-Down** menus.

Incident Location

Describe where the incident occurred, including sufficient information to identify the incident location. Enter the city where the incident occurred. Select the appropriate state from the **Drop-Down** menu.

Latitude and Longitude

Example 10 — Latitude and Longitude

Latitude: N 40 24.1
Longitude: W 102 23.8

If known, report the latitude and longitude of the incident. Use degrees (dd) and minutes (mm.m) for latitude and degrees (ddd) and minutes (mm.m) for longitude. Also select north or south (latitude) and west or east (longitude) from the **Drop-Down** menus.

AM / PM menu selections:

AM
PM

Time zone menu selections:

1. Atlantic
2. Eastern
3. Central
4. Mountain
5. Pacific
6. Alaska
7. Hawaii

Incident Categorization

Often events such as [fires](#) or [derailments](#) happen as the result of other occurrences (e.g., a collision). This section of the Major Incident Report form (S&S-40) Rail requires that the reporter enumerate each of the events involved in an incident (e.g., collision, fire, derailment, evacuation) and categorize one event as a primary event and the remaining as secondary events.

Primary Event

The primary event is the first harmful occurrence in an incident. Select only one primary event from the incidents listed on the form by clicking on the corresponding box.

When the appropriate box is selected, an incident detail screen appears. The instructions for these screens are provided at the end of this section.

Primary Event Types:

- a. [Collision](#)
- b. [Security incident](#)
- c. [Derailment](#)
- d. [Evacuation](#)
- e. [Fire event](#)
- g. [Facility / injury not otherwise classified \(NOC\)](#)

Secondary Events

Secondary events are events that occur as a result of the primary event. Multiple secondary events may be selected by clicking on the relevant box(es). Information is completed for secondary events in the same manner as for primary events.

When the appropriate box is selected, an incident detail screen appears. The instructions for these screens are provided at the end of this section.

Secondary Event Types:

- a. Collision
- b. Derailment
- c. Evacuation
- d. Fire

Example 11 — Incident Categorization

Example: Incident Involves One Event

A fatality occurs as a result of a homicide.

Solution: A Major Incident Report form (S&S-40) Rail must be completed because a fatality occurred.

Homicide is a security incident and is selected as the primary event on the Major Incident Report form (S&S-40).

Example: Incident Involves More than One Event

A light rail (LR) vehicle collides with a passenger car at a grade crossing and subsequently derails, then catches fire. All passengers are evacuated.

Solution: A Major Incident Report form (S&S-40) Rail is completed because the incident occurred at a grade crossing and because it involved an evacuation.

Collision is selected as the primary event. Derailment, fire, and evacuation are all selected as secondary events.

Rail Alignment Type

If the agency has selected a [rail](#) mode at the top of the form ([automated guideway](#) (AG), [cable car](#) (CC), [heavy rail](#) (HR), [inclined plane](#) (IP), [light rail](#) (LR), or [monorail](#) (MO)), the rail alignment type must be completed. Select the rail alignment type that most closely describes the configuration and use of the track.

Grade Crossing Control

Select the grade crossing control that most closely describes the traffic control or other devices present in incidents related to [grade crossings](#). Complete only if incident occurred at a grade crossing.

Rail Alignment Type menu selections:

1. Exclusive right-of-way (ROW): Tunnel
2. Exclusive right-of-way (ROW): Elevated structure
3. Exclusive right-of-way (ROW): At grade
4. Semi-exclusive right-of-way (ROW)
5. Non-Exclusive right-of-way (ROW): Mixed traffic / LRT
6. Non-Exclusive right-of-way (ROW): Transit mall
7. Non-Exclusive right-of-way (ROW): LRT / pedestrian mall
8. Shared track / corridor (LRT / FRA): Temporal separation
9. Shared track / corridor (LRT / FRA): Non-temporal separation
10. Other non-exclusive (describe)*

Grade Crossing Control menu selections:

1. Active devices: Gates (median barrier)
2. Active devices: Gates (no median barrier)
3. Active devices: Flashing lights
4. Active devices: Traffic signal
5. Active devices: Train approaching sign
6. Active devices: Quad gates
7. Passive devices: Stop sign
8. Passive devices: Cross bucks
9. No control device

Intersection Controls

Select the intersection control that most closely describes the traffic control device or person controlling traffic, if any, in use at the time of the incident. Complete only if incident occurred at an intersection.

Environmental Conditions

Complete a brief description of significant environmental details.

Weather

Report weather conditions as they relate to the incident, if weather conditions are relevant to the incident. For incidents occurring indoors (e.g. in a station) select **Other** and explain.

Intersection Control menu selections:

1. Traffic signal
2. Police officer, flagman, or other individual
3. Stop sign
4. Yield sign
5. Crossing gate
6. No control device, individual, or sign
7. Other (describe)*

Weather Conditions menu selections:

1. Clear
2. Cloudy
3. Fog / mist
4. Rain
5. Snow or sleet
6. Other (describe)*

Example 12 — Weather Condition Reporting

Example: Fog / Safety Incident

A monorail vehicle (MO) leaves the station in foggy conditions.

Solution: Select **Fog / Mist** since weather is relevant to safety incidents outdoors.

Example: Indoors Safety Incident

A passenger is killed as a result of an incident involving an elevator in a station.

Solution: Select **Other (describe)** and state that the incident happened indoors.

Traffic

Report whether traffic was heavy, medium, or light at the time and location of the incident, if applicable. This classification should be on prevailing local conditions using the following guidelines:

- Heavy traffic — similar to rush hour
- Medium — similar to midday and early evening, or
- Light — typical of late night.

Traffic menu selections:

1. Heavy
2. Medium
3. Light

Example 13 — Traffic Condition Reporting

Example: Separate Right-of-Way (ROW) Incident

A subway vehicle in a tunnel strikes a trespasser.

Solution: Select **Others** since traffic conditions are not applicable to this situation since the train was operating on an exclusive right-of-way (ROW).

Right-of-Way (ROW) / Roadway Conditions

Select the condition of right-of-way (ROW) / roadway surface at the time of the incident.

Right-of-Way (ROW) / Roadway Conditions menu selections:

1. Dry
2. Wet
3. Snow / slush
4. Ice
5. Debris
6. Other (describe)*

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Right-of-Way (ROW) / Roadway Configuration

Select the alignment of right-of-way (ROW) / roadway in which the incident occurred.

Right-of-Way (ROW) / Roadway Type

Select the type of right-of-way (ROW) / roadway in which the incident occurred.

Environmental Conditions Description

If there is additional relevant information regarding the environmental conditions that cannot be described adequately using the **Drop-Down** menus, use the text field to provide details.

Vehicles Involved

This section of the Major Incident Report form (S&S-40) Rail is used to identify the vehicles involved in the major incident. For each vehicle involved in the incident, click the **Add Vehicle** button. When this button is clicked to input information about the transit vehicle, two fields will appear (vehicle type). This will allow the reporter to add information about their vehicle. If multiple vehicles are involved, continue to add vehicles until all vehicles have been entered into the system. The reporter will be asked to enter the vehicle type of all other vehicles involved in the incident.

If there are no vehicles involved in the incident (for example, in the case of a fire on a rail station platform), do not click the **Add Vehicle** button. No vehicle information is required.

Click the **Delete Vehicle** button to remove any excess vehicles that you may have selected.

Complete the information for each field as described below. For rail vehicles, treat multi-car trains as one vehicle. That is, for a six-car train, do not enter six separate vehicles. Click the **Add Vehicle** button once and describe the train as one vehicle.

Vehicle Type

For each vehicle, select the type of vehicle involved from the **Drop-Down** menu.

The transit vehicle is always entered as the first vehicle. If multiple transit vehicles are involved in the incident, transit vehicles may be entered as other using the **Add Vehicle** button. Click the **Delete Vehicle** button to remove any excess vehicles that you may have selected.

Note that on the Major Incident Report form (S&S-40) Rail, only rail modes will be listed in the **Drop-Down** menu for Vehicle 1. For any subsequent vehicles that are added, the **Drop-Down** menu will include all modes.

Vehicle Action

For each vehicle, select the action of the vehicle involved from the **Drop-Down** menu.

Vehicle Manufacturer

If a transit vehicle was selected as the **Vehicle Type**, the **Vehicle Manufacturer** drop-down will appear. For each transit vehicle involved, select a vehicle manufacturer from the **Drop-Down** menu.

Right-of-Way (ROW) / Roadway Configuration menu selections:

1. Straight
2. Level
3. Downhill
4. Curve
5. Uphill

Right-of-Way (ROW) / Roadway Type menu selections:

1. Divided highway
2. Ramp
3. Bridge
4. Intersection / grade crossing
5. Tunnel
6. Private property

Vehicle 1 Type menu selections:

1. Transit: [Aerial tramways](#) (TR)
2. Transit: [Automated guideway vehicles](#) (AG)
3. Transit: [Cable cars](#) (CC)
4. Transit: [Heavy rail passenger cars](#) (HR)
5. Transit: [Inclined plane vehicles](#) (IP)
6. Transit: [Light rail vehicles \(Streetcars\)](#) (LR)
7. Transit: [Monorail vehicles](#) (MO)
8. Transit: [Commuter rail locomotives](#) (RL)
9. Transit: [Commuter rail passenger coaches](#) (RP)
10. Transit: [Commuter rail self-propelled passenger cars](#) (RS)
11. Transit: Non-revenue
12. Commercial: Rail
13. Other (describe)*

Vehicle Action menu selections:

1. Going straight
2. Proceeding through switch
3. Stopping / starting
4. Negotiating a curve
5. Other (describe)*

Pedestrians Involved

This section of the Major Incident Report form (S&S-40) Rail is used to describe the pedestrians involved in the major incident. Pedestrians include individuals on skateboards or scooters.

For each pedestrian involved in the incident, click the **Add Pedestrian** button. Each time this button is clicked, one field will appear (pedestrian description) that allows the reporter to add information about that pedestrian from a **Drop-Down** menu. If, for example, there were three pedestrians involved in the incident, click the **Add Pedestrian** button three times.

If there are no pedestrians involved in the incident (for example, in the case of a transit vehicle colliding with a passenger vehicle), do not click the **Add Pedestrian** button. No pedestrian information is required.

Click on the **Delete Pedestrian** button to remove any excess pedestrians that you may have selected.

Gender

For each pedestrian, select the gender of the person involved from the **Drop-Down** menu.

Pedestrian Gender menu selections:

Male
Female

Age Range

For each pedestrian, select the age range of the person involved from the **Drop-Down** menu.

Pedestrian Age Range menu selections:

1 – 5	26 – 35
6 – 12	36 – 45
13 – 17	46 – 60
18 – 25	over 60

Pedestrian Action

For each pedestrian, select the action of the person involved from the **Drop-Down** menu.

Pedestrian Action menu selections:

1. Not applicable
2. Crossing / entering track
3. On track
4. Other (describe)*

Other Relevant Incident Information not Provided Elsewhere on this Form

Provide a brief description of significant incident details not captured in other fields.

Incident Primary and Secondary Event Summary

This section automatically totals key data reported in the incident detail forms for the primary and secondary events. The key data are:

- [Fatalities](#) by type of individual involved
- [Injuries](#) by type of individual involved, and
- Total estimated [property damage](#).

The instructions for the incident detail forms are provided at the end of this section.

Contact Information for Person Reporting Incident

FTA may need to contact the individual completing the form or another agency-designated contact concerning details that may not be clear, or to further clarify data. Provide the following information for an agency contact for the Major Incident Report form (S&S-40) Rail: name, title, phone number, and e-mail address.

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Primary and Secondary Incident Detail Screens

This section describes the screens that appear when the **Detail** buttons are clicked under either primary event or secondary event. The screens include:

- [Collision](#) detail
- [Security incident](#) detail
- [Derailment](#) detail
- [Evacuation](#) detail
- [Fire](#) event detail
- [Fatality / injury not otherwise classified](#) (NOC) detail.

Collision Event Detail

01 Collision impact type*

02 Collision with*

03 Collision location*

04 Collision description

	a Transit Passengers	b Transit Facility Occupants	c Transit Employees	d Other Workers	e Trespassers	f Other
05 Fatalities	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
06 Injuries	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
07 Estimated Property Damage \$	<input type="text"/>					

Primary and Secondary Collision Detail Screen

When the **Collision** box is clicked under primary event, a **Collision Detail** screen appears. The following information must be completed.

Collision Impact Type

[Collision](#) impact type describes the orientation of the vehicles involved in a collision. If the transit vehicle is involved in a [collision with another vehicle](#), select the orientation — front, back, angle, sideswipe — that is most appropriate for the collision in the **Drop-Down** menu.

Each choice is from the point of view of the transit vehicle. That is, back means that another vehicle hit the back of the transit vehicle.

Collision Impact Type menu selections:

1. Front
2. Back
4. Sideswipe
5. Other (describe)*

Example 14 — Collision Impact Type Reporting

Example: Rear-End Collision

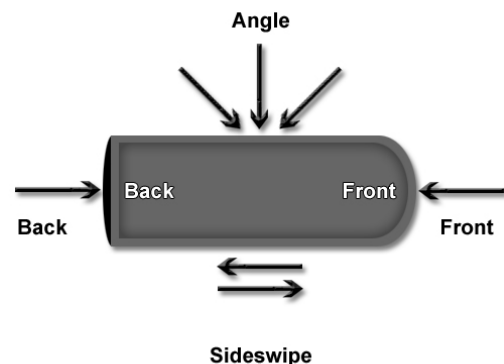
A transit vehicle is rear-ended.

Solution: Select **Back**

Example: Head On Collision

A streetcar (LR) strikes a motor vehicle head on (i.e., with the front of the vehicle).

Solution: Select **Front** because the incident involved the front of the streetcar striking the motor vehicle.



Collision With

Use this **Drop-Down** menu to specify the object or person (other than the transit vehicle) that is involved in the collision.

Collision Location

Select the collision location that most closely describes the site at which the collision took place. If a situation occurs that cannot be described adequately using one of these **Drop-Down** menu options, use the **Other (describe)*** field to provide details.

Collision With menu selections:

1. Person
2. Animal
3. Fixed object (describe)
4. Motor vehicle
5. Rail vehicle
6. Other (describe)*

Collision Description

Use this box to provide details of the [collision](#), including any information that offers further specification not provided in the **Drop-Down** menus.

Fatalities and Injuries

Enter the numbers of [transit passengers](#), [transit facility occupants](#), [transit employees](#), [other workers](#), [trespassers](#), and [others](#) killed or receiving [injuries](#) due to a collision.

Estimated Property Damage

Enter the estimated dollar amount required to repair or replace all vehicles (including transit revenue and non-revenue and non-transit vehicles) or public or private property / facilities (including track, signals, buildings, and private facilities damaged) involved in the incident to a state equivalent to that which existed prior to the incident.

[Property damage](#) includes but is not limited to the following:

- Transit and non-transit vehicle damage
- Stations as well as non-transit facilities
- Rights-of-way (ROW) and items surrounding rights-of-way (ROW), such as utility poles
- Bus stops
- Maintenance facilities and other private property.

The key points regarding estimated property damage are:

- Estimated damage does not only include transit property damage but also damage to other vehicles and property (other than personal property) involved in the incident and not owned by the transit agency.
- The amount paid (or an estimate made for insurance purposes) is reported for property damage. In the case where replacement is necessary, the depreciated replacement cost is reported.
- The cost of clearing wreckage or damage to non-transit agency property is also included in the property damage value.
- The cost of an accident investigation is not included the estimated property damage.
- Damage to personal property, such as the value of laptops, cell phones, or other personal property items damaged or destroyed in an incident are not included estimated property damage.

Collision Location menu selections:

1. Revenue facility: Transit center
2. Revenue facility: Platform
3. Revenue facility: Other (describe)*
4. Non-revenue facility
5. Right-of-way (ROW) / roadway: Grade crossing
6. Right-of-way (ROW) / roadway: Intersection
7. Right-of-way (ROW) / roadway: Other (describe)*
8. Commercial property
9. Other (describe)*

Example 15 — Collision Property Damage

Example: A heavy rail (HR) vehicle collides with a passenger car at a grade crossing. The passenger car is totaled; the train will require a new coupler and some bodywork. The car has an estimated value of \$8,000 (transit agency uses the car's blue book value or other reasonable estimate of present value). The cost of the coupler is \$30,000; other bodywork to the train is estimated at \$10,000

Solution: This incident is reported on the Major Incident Report form (S&S-40) because it is a grade crossing collision. For property damage enter **\$48,000** (\$8,000 + \$30,000 + \$10,000).

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Security Incident Event Detail						
01 Security incident type*	<div>Make Selection</div>					
02 Security incident location*	<div>Make Selection</div>					
04 Security incident description	<div></div>					
	a	b	c	d	e	f
	Transit Passengers	Transit Facility Occupants	Transit Employees	Other Workers	Trespassers	Other
05 Fatalities	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
06 Injuries	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
07 Estimated Property Damage \$	<div></div>					

Primary Security Incident Detail Screen

[Security incidents](#) resulting in fatalities, forcible rape, confirmed terrorist / security events: bombings, chemical / biological / radiological / other release, cyber, hijacking, sabotage, major injuries, or property damage equal to or exceeding \$25,000 are reported on the Major Incident Report form (S&S-40) Rail. When the **Security Incident** button is clicked under primary event, the **Security Detail** screen appears.

Any security incidents not meeting the thresholds described above are to be reported within the Non-Major Summary Report form (S&S-50).

The consequences of security incidents (i.e., crimes) should not be reported as safety statistics. For example, injuries or deaths resulting from assaults, arsons, and homicides are not safety related; they are security incidents.

Security Incident Type

Select the security incident type from the **Drop-Down** menu. The list includes security incident types that can produce the threshold values for [major incident](#) reporting — a fatality related to the incident, two or more [injuries](#), or property damage equal to or exceeding \$25,000.

Care should be exercised in choosing the homicide selection. Homicide involves the willful killing of one or more human beings by another. It excludes deaths caused by negligence, suicides, accidental deaths and traffic fatalities. It also excludes attempts to kill and assaults to kill (i.e., assault to murder and attempted murder); these incidents are reported as aggravated assaults.

Security Incident Type menu selections:

1. [Aggravated assault](#)
2. [Arson](#)
3. [Bombing](#)
4. [Bomb threat](#)
5. [Burglary](#)
6. [Chemical / biological / radiological / other release](#)
7. [Cyber incident](#)
8. [Forcible rape](#)
9. [Hijacking](#)
10. [Homicide](#)
11. [Larceny / theft](#)
12. [Motor vehicle theft](#)
13. [Robbery](#)
14. [Sabotage](#)
15. [Vandalism](#)

Security Incident Location

The security location is a description of where the incident took place. Select the appropriate security location from the **Drop-Down** menu.

Security Description

Use this box to provide details of the security incident, including any information that offers further specification not provided in the **Drop-Down** menus.

Fatalities and Injuries

Enter the numbers of those [transit passengers](#), [transit facility occupants](#), [transit employees](#), [other workers](#), [trespassers](#), and [others](#) killed or receiving [injuries](#) due to a [security incident](#).

Estimated Property Damage

Enter the estimated dollar amount required to repair or replace all vehicles (including transit revenue and non-revenue and non-transit vehicles) or public or private property / facilities (including track, signals, buildings, and private facilities damaged) involved in the incident to a state equivalent to that which existed prior to the incident.

Security Incident Location menu selections:

1. Revenue facility: Transit center
2. Revenue facility: Platform
3. Revenue facility: Other (describe)*
4. Non-revenue facility
5. Right-of-way (ROW) / roadway: Grade crossing
6. Right-of-way (ROW) / roadway: Intersection
7. Right-of-way (ROW) / roadway: Other (describe)*
8. Commercial property
9. Other (describe)*

Derailment Event Detail						
01 Derailment type*	Make Selection					
02 Derailment location*	Make Selection					
03 Derailment description						
	a	b	c	d	e	f
	Transit Passengers	Transit Facility Occupants	Transit Employees	Other Workers	Trespassers	Other
04 Fatalities						
05 Injuries						
06 Estimated Property Damage \$						

Primary and Secondary Derailment Detail Screen

When the **Derailment** button is clicked under primary or secondary event, the **Derailment Detail** screen appears. The following information must be completed.

Derailment Type

From the **Drop-Down** menu select the [derailment](#) type that best describes the incident.

Derailment Location

Derailment location describes the type of track on which the derailment took place, including [switch](#), [curve](#), and [tangent track](#). Select the appropriate location from the **Drop-Down** menu.

Derailment Description

Use this box to provide details of the derailment incident, including any information that offers further specification not provided in the **Drop-Down** menus.

Derailment Type menu selections:

1. Going straight
2. Proceeding through switch
3. Stopping / starting
4. Negotiating a curve
5. Other (describe)*

Derailment Location menu selections:

1. Switch
2. Curve
3. Tangent track

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Fatalities and Injuries

Enter the numbers of those [transit passengers](#), [transit facility occupants](#), [transit employees](#), [other workers](#), [trespassers](#), and [others](#) killed or receiving [injuries](#) due to a derailment.

Estimated Property Damage

Enter the estimated dollar amount required to repair or replace all vehicles (including transit revenue and non-revenue and non-transit vehicles) or public or private property / facilities (including track, signals, buildings, and private facilities damaged) involved in the incident to a state equivalent to that which existed prior to the incident.

Evacuation Event Detail						
01 Evacuation type*	<input type="text" value="Make Selection"/>					
02 Evacuation location	<input type="text" value="Make Selection"/>					
03 Evacuation description	<input type="text"/>					
04 Fuel type	<input type="text" value="Make Selection"/>					
	a	b	c	d	e	f
	Transit Passengers	Transit Facility Occupants	Transit Employees	Other Workers	Trespassers	Other
05 Fatalities	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
06 Injuries	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
07 Estimated Property Damage \$	<input type="text"/>					

Primary and Secondary Evacuation Detail Screen

When the **Evacuation** button is clicked under primary or secondary event, the **Evacuation Detail** screen appears. The following information must be completed.

Evacuation Type

Select the event from the **Drop-Down** menu that caused the [evacuation](#). If multiple events prompted an evacuation (e.g., smoke and a flammable fuel leak) select one evacuation type and note the others in the **Evacuation Description** box.

If a vehicle was evacuated because one of the situations in the **Drop-Down** menu was suspected (e.g., fuel leak was suspected), but later investigation shows did not occur (e.g., fluid turned out to be water), the event is not reported.

Evacuation Type menu selections:

1. Bombing
2. Chemical / biological / radiological / other release
3. Hijacking
4. Sabotage
5. Fire / smoke
6. Hazardous material
7. Other (describe)*

Example 16 — Evacuation Type Reporting

Example: Train Fills with Smoke

A train begins to fill with smoke and is evacuated.

Solution: Select: **Fire / smoke**.

Example: Train Breakdown

A train breaks down between stations and passengers must be evacuated onto the right-of-way (ROW) to reach the nearest station. There are no overriding safety concerns.

Solution: This is not a major incident. No NTD safety or security reporting is required. Reporting of evacuations must be due to life safety reasons — not operational issues.

Evacuation Location

The evacuation location is a description of where the evacuation took place. Select the appropriate evacuation location from the **Drop-Down** menu.

Evacuation Description

Use this box to provide details of the evacuation incident, including any information that offers further specification not provided in the **Drop-Down** menus.

Fuel Type

If the evacuation was related to fuel, select the appropriate fuel type from the **Drop-Down** menu.

Fatalities and Injuries

Enter the numbers of those [transit passengers](#), [transit facility occupants](#), [transit employees](#), [other workers](#), [trespassers](#), and [others](#) killed or receiving [injuries](#) due to an [evacuation](#) incident.

Estimated Property Damage

Enter the estimated dollar amount required to repair or replace all vehicles (including transit revenue and non-revenue and non-transit vehicles) or public or private property / facilities (including track, signals, buildings, and private facilities damaged) involved in the incident to a state equivalent to that which existed prior to the incident.

Evacuation Location menu selections:

1. Revenue facility: Transit center
2. Revenue facility: Platform
3. Revenue facility: Other (describe)*
4. Non-revenue facility
5. Right-of-way (ROW) / roadway: Grade crossing
6. Right-of-way (ROW) / roadway: Intersection
7. Commercial property
8. Other (describe)*

Fuel Type menu selections:

1. Not applicable
2. Bio-diesel (BD)
3. Bunker fuel (BF)
4. Compressed natural gas (CNG)
5. Diesel (DF)
6. Dual fuel (DU)
7. Electric battery (EB)
8. Electric propulsion (EP)
9. Ethanol (ET)
10. Gasoline (GA)
11. Hybrid diesel (HD)
12. Hybrid gasoline (HG)
13. Grain additive (GR)
14. Kerosene (KE)
15. Liquefied natural gas (LNG)
16. Liquefied petroleum gas (LPG)
17. Methanol (MT)
18. Other (OR) (describe)*

Fire Event Detail						
01 Fire details*	Make Selection					
02 Fire location*	Make Selection					
03 Fire description						
04 Fuel type	Make Selection					
	a	b	c	d	e	f
	Transit Passengers	Transit Facility Occupants	Transit Employees	Other Workers	Trespassers	Other
05 Fatalities						
06 Injuries						
07 Estimated Property Damage \$						

Primary and Secondary Fire Event Detail Screen

When the **Fire Event** button is clicked under primary or secondary event, the **Fire Detail** screen appears. The following information must be completed.

Fire Event Details

Provide information, using the **Drop-Down** menu, on the nature of the [fire](#). The definition of fires requires that fire suppression personnel (e.g., fire fighters or in-house personnel) or equipment (e.g., fire extinguishers or hoses) be involved for the incident to be considered reportable. Arsons are not reported as fires, but as security incidents.

Fire Event Detail menu selections:

1. Fuel
2. Cable
3. Other electrical (describe)*
4. Smoking materials (i.e., cigarettes)
5. Battery
6. Other (describe)*

Example 17 — Fire Details

Example: A passenger drops a lit cigarette in a station. The fire causes extensive damage and requires fire suppression equipment to put out.

Solution: Select: **Smoking materials (i.e., cigarettes)**

Fire Location

The fire location is a description of where the incident took place. Select the appropriate location from the **Drop-Down** menu.

Fire Description

Use this box to provide details of the fire incident, including any information that offers further specification not provided in the **Drop-Down** menus.

Fuel Type

If the fire was related to fuel, select the appropriate fuel type from the **Drop-Down** menu.

Fire Location menu selections:

1. In vehicle
2. Revenue facility: Transit center
3. Revenue facility: Platform
4. Revenue facility: Other (describe)*
5. Non-revenue facility
6. Right-of-way (ROW) / roadway: Grade crossing
7. Right-of-way (ROW) / roadway: Intersection
8. Right-of-way (ROW) / roadway: Other
9. Other (describe)*

Fatalities and Injuries

Enter the numbers of those [transit passengers](#), [transit facility occupants](#), [transit employees](#), [other workers](#), [trespassers](#), and [others](#) killed or receiving [injuries](#) due to a [fire](#).

Estimated Property Damage

Enter the estimated dollar amount required to repair or replace all vehicles (including transit revenue and non-revenue and non-transit vehicles) or public or private property / facilities (including track, signals, buildings, and private facilities damaged) involved in the incident to a state equivalent to that which existed prior to the incident.

Fuel Type menu selections:

1. Not applicable
2. Bio-diesel (BD)
3. Bunker fuel (BF)
4. Compressed natural gas (CNG)
5. Diesel (DF)
6. Dual fuel (DU)
7. Electric battery (EB)
8. Electric propulsion (EP)
9. Ethanol (ET)
10. Gasoline (GA)
11. Hybrid diesel (HD)
12. Hybrid gasoline (HG)
13. Grain additive (GR)
14. Kerosene (KE)
15. Liquefied natural gas (LNG)
16. Liquefied petroleum gas (LPG)
17. Methanol (MT)
18. Other (OR) (describe)*

Fatalities, Injuries Not Otherwise Classified (NOC) Event Detail

01 Incident type*

02 NOC location

03 NOC description

	a Transit Passengers	b Transit Facility Occupants	c Transit Employees	d Other Workers	e Trespassers	f Other
04 Fatalities	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
05 Injuries	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
06 Estimated Property Damage \$	<input type="text"/>					

Primary Not Otherwise Classified (NOC) Detail Screen

When the **Not Otherwise Classified (NOC)** button is clicked under primary event, the **Not Otherwise Classified (NOC) Detail** screen appears. The following information must be completed.

Incident Type

One of the types of [not otherwise classified](#) (NOC) incidents is selected from the **Drop-Down** menu. If a situation occurs that cannot be described adequately using one of these **Drop-Down** menu selections, use the **Fatalities and Injuries Not Otherwise Classified Description** field to provide details.

Incident Type menu selections:

1. Slip and fall
2. Electric shock
3. Other (describe)*

Example 18 — Incident Type Reporting

Example: Electrocution

A passenger in a light rail (LR) station enters the right-of-way (ROW), makes contact with the live third rail, and is killed.

Solution: Select: **Electric shock** for not otherwise classified (NOC) type.

NOC Location

The [not otherwise classified](#) (NOC) location is a description of where the incident took place.

If a situation occurs that cannot be described adequately using one of these **Drop-Down** menu options, use the **Fatalities and Injuries Not Otherwise Classified (NOC) Description** field to provide details.

Example 19 — Incident Location

Example: In Revenue Facility

A passenger is killed on an escalator.

Solution: Select **In revenue facility: Associated with escalator** for not otherwise classified (NOC) location.

Not Otherwise Classified (NOC) Location menu selections:

1. Boarding / alighting
2. In revenue facility: Associated with elevators
3. In revenue facility: Associated with escalators
4. In revenue facility: Ramps
5. In revenue facility: Stairways
6. In revenue facility: Platform / stop / waiting areas
7. In revenue facility: Other (describe)*
8. In non-revenue location: Parking facility
9. In non-revenue location: In yard or other non-revenue area
10. Other location (describe)*

NOC Description

Use this box to provide details of the [not otherwise classified](#) (NOC) incident, including any information that offers further specification not provided in the **Drop-Down** menus.

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Fatalities and Injuries

Enter the numbers of those [transit passengers](#), [transit facility occupants](#), [transit employees](#), [other workers](#), [trespassers](#), and [others](#) killed or receiving [injuries](#) due to the incident(s).

Estimated Property Damage

Enter the estimated dollar amount required to repair or replace all vehicles (including transit revenue and non-revenue and non-transit vehicles) or public or private property / facilities (including track, signals, buildings, and private facilities damaged) involved in the incident to a state equivalent to that which existed prior to the incident.

Line by Line Instructions for Rail Modes

Completing the Major Incident Report form (S&S-40) Rail

From the **Safety and Security** screen, click on **Add Major Incident** button.

Complete one Major Incident Report form (S&S-40) for each major incident following the instructions in this section.

At the bottom of the Safety and Security tab click on the **Add Major Incident** button, this will take you to the **Add Major Incident** screen.

Click on the **Generate Form** button one time only for each form you wish to generate.

The software will return you to the **Safety and Security** tab screen and the new Major Incident form (S&S-40) will be listed and highlighted.

To begin entering data, click on the new Major Incident form (S&S-40) for the appropriate mode and type of service to open the form.

The available modes / service options are determined by the data entered on the S&S-10.

Getting Help

Form Level Help: Click on the **Help** tab at the top of the screen for form level help.

A **Form Note** can be attached to any form. Use the **Add Form Note** link for relevant information to a specific field, to the entire form or to multiple forms. Click on the **Add Form Note** link at the top of the screen and enter your note on the **Notes** screen. You can review and / or edit a **Form Note** from the **Notes** tab.

#	Column	Item	Action	Instruction
01		Mode /Type of Service	Pre-filled — cannot be edited, review for accuracy.	Determined when form was generated.
02		Date and Time of Incident	Drop-Down menu selection.	Report the month, day, year, and time that the incident occurred from the Drop-Down menus.
03		Incident Location — City, State	Drop-Down menu selection.	Report the city and state where the incident occurred from the Drop-Down menus.
03		Incident Location — Latitude and Longitude	Drop-Down menu selection.	If known, report the latitude and longitude of the incident. Use degrees (dd) and minutes (mm.m) for latitude and degrees (ddd) and minutes (mm.m) for longitude. Also select north or south (latitude) and west or east (longitude) from the Drop-Down menus.
04		Incident Categorization — Primary Event	Checklist — select one.	Only one primary event may be reported. Click on the corresponding Incident Detail button: a. Collision b. Security incident c. Derailment d. Evacuation e. Fire g. Fatality / injuries not otherwise classified (NOC).
05		Incident Categorization — Secondary Events	Checklist — select as many as apply.	Multiple secondary events may be reported. For each secondary event type click on the corresponding Incident Detail button: a. Collision b. Derailment c. Evacuation d. Fire .
06		Additional Detail — Rail Alignment Type	Drop-Down menu selection.	Select the rail alignment type that most closely describes the configuration and use of the track from the Drop-Down menu:

Completing the Major Incident Report form (S&S-40) Rail

			<ol style="list-style-type: none"> 1. Exclusive right-of-way (ROW): Tunnel 2. Exclusive right-of-way (ROW): Elevated structure 3. Exclusive right-of-way (ROW): At grade 4. Semi-exclusive right-of-way (ROW) 5. Non-exclusive right-of-way (ROW): Mixed traffic / LRT 6. Non-exclusive right-of-way (ROW): Transit mall 7. Non-exclusive right-of-way (ROW): LRT / pedestrian mall 8. Shared track / corridor (LRT / FRA): Temporal separation 9. Shared track / corridor (LRT / FRA): Non-temporal separation 10. Other non-exclusive (describe)*.
07	Additional Detail — Grade Crossing Control	Drop-Down menu selection.	<p>Select the grade crossing control that most closely describes the traffic control or other devices present in incidents related to grade crossings from the Drop-Down menu:</p> <ol style="list-style-type: none"> 1. Active devices: Gates (median barrier) 2. Active devices: Gates (no median barrier) 3. Active devices: Flashing lights 4. Active devices: Traffic signal 5. Active devices: Train approaching sign 6. Active devices: Quad gates 7. Passive devices: Stop sign 8. Passive devices: Cross bucks 9. No control device.
08	Additional Detail — Intersection Controls	Drop-Down menu selection.	<p>Select the intersection control that most closely describes the traffic control device or person controlling traffic, if any, in use at the time of the incident from the Drop-Down menu:</p> <ol style="list-style-type: none"> 1. Traffic signal 2. Police officer, flagman, or other individual 3. Stop sign 4. Yield sign 5. Crossing gate 6. No control device, individual, or sign 7. Other (describe)*.
	Additional Detail — Describe Other		Use this text box to provide additional detail on rail alignment type, grade crossing controls, and intersection controls.
09	Environmental Conditions — Weather	Drop-Down menu selection.	<p>Select weather conditions as they relate to the incident, if weather conditions are relevant to the incident from the Drop-Down menu:</p> <ol style="list-style-type: none"> 1. Clear 2. Cloudy 3. Fog / mist 4. Rain 5. Snow or sleet

Completing the Major Incident Report form (S&S-40) Rail

			6. Other (describe)*.
10	Environmental Conditions — Traffic	Drop-Down menu selection.	<p>Select whether traffic was heavy, medium, or light at the time and location of the incident, if applicable from the Drop-Down menu:</p> <ol style="list-style-type: none"> 1. Heavy 2. Medium 3. Light.
12	Environmental Conditions — Right-of-Way (ROW) / Roadway Conditions	Drop-Down menu selection.	<p>Select the condition of right-of-way (ROW) / roadway surface at the time of the incident from the Drop-Down menu:</p> <ol style="list-style-type: none"> 1. Dry 2. Wet 3. Snow / slush 4. Ice 5. Debris 6. Other (describe)*.
13	Environmental Conditions — Right-of-Way (ROW) / Roadway Configuration	Drop-Down menu selection.	<p>Select the alignment of right-of-way (ROW) / roadway in which the incident occurred from the Drop-Down menu:</p> <ol style="list-style-type: none"> 1. Straight 2. Level 3. Downhill 4. Curve 5. Uphill.
14	Environmental Conditions — Right-of-Way (ROW) / Roadway Type	Drop-Down menu selection.	<p>Select the type of right-of-way (ROW) / roadway in which the incident occurred from the Drop-Down menu:</p> <ol style="list-style-type: none"> 1. Divided highway 2. Ramp 3. Bridge 4. Intersection / grade crossing 5. Tunnel 6. Private property.
	Environmental Conditions — Describe Other		Provide additional detail regarding environmental conditions if space is needed to clarify.
15	Vehicles Involved — Vehicle Type	Drop-Down menu selection.	<p>For each vehicle involved in the incident, click the Add Vehicle button.</p> <p>For each transit vehicle, select the type of rail vehicle involved from the Drop-Down menu.</p> <ol style="list-style-type: none"> 1. Transit: Aerial tramways (TR) 2. Transit: Automated guideway vehicles (AG) 3. Transit: Cable cars (CC) 4. Transit: Heavy rail passenger cars (HR) 5. Transit: Inclined plane vehicles (IP) 6. Transit: Light rail vehicles (Streetcars) (LR) 7. Transit: Monorail vehicles (MO) 8. Transit: Commuter rail locomotives (RL) 9. Transit: Commuter rail passenger coaches (RP) 10. Transit: Commuter rail self-propelled passenger

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Completing the Major Incident Report form (S&S-40) Rail

			cars (RS) 11. Transit: Non-revenue 12. Commercial: Rail 13. Other (describe)*. For each vehicle, supply an associated vehicle description. For any subsequent vehicles that are added, the Drop-Down menu will include all modes.
15	Vehicles Involved — Vehicle Action	Drop-Down menu selection.	For each transit vehicle, select the type of vehicle action from the Drop-Down menu. 1. Going straight 2. Proceeding through switch 3. Stopping / starting 4. Negotiating a curve 5. Other (describe)*.
15	Vehicles Involved — Vehicle Manufacturer	Drop-Down menu selection.	For each transit vehicle, select a manufacturer from the Drop-Down menu.
16	Pedestrians Involved — Pedestrian Description		For each pedestrian involved, click the Add Pedestrian button. For each pedestrian, complete the Drop-Down menus.
16	Pedestrians Involved — Pedestrian Action		For each pedestrian, select the type of pedestrian action from the Drop-Down menu. 1. Not applicable 2. Crossing / entering track 3. On track 4. Other (describe)*.
16	Pedestrians Involved — Describe Other		Provide additional detail regarding pedestrians if space is needed to clarify.
17	Other Relevant Incident Information not Provided Elsewhere on this Form		Provide a brief description of significant incident details not captured in other fields.
18	a - f Incident Primary and Secondary Event Summary — Fatalities	Auto-Calc field — cannot be edited.	This field displays the total number of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others killed due to the incident. This is the sum of the fatalities reported on the Incident Detail screens.
19	a - f Incident Primary and Secondary Event Summary — Injuries	Auto-Calc field — cannot be edited.	This field displays the total number of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others killed due to the incident. This is the sum of the injuries reported on the Incident Detail screens.
20	Incident Primary and Secondary Event Summary — Total Estimated Property Damage	Auto-Calc field — cannot be edited.	This field displays the total estimated dollar amount required to repair or replace all vehicles or public or private property / facilities involved in the incident to a state equivalent to that which existed prior to the incident. This is the sum of the estimated collision with another vehicle reported on the Incident Detail screens.

Completing the Major Incident Report form (S&S-40) Rail

21	Contact Information for Person Reporting Incident		Include information to allow follow-up FTA contact concerning details that may not be clear or to further clarify data.
Collision Detail — Primary and Secondary Incidents			
01	Collision Impact Type	Drop-Down menu selection.	<p>If the transit vehicle is involved in a collision with another vehicle, select the orientation that is most appropriate for the collision in the Drop-Down menu:</p> <ol style="list-style-type: none"> 1. Front 2. Back 3. Angle 4. Sideswipe 5. Other (describe)*.
02	Collision With	Drop-Down menu selection.	<p>The Drop-Down menu is used to specify the object or person (other than the transit vehicle) that is involved in the collision:</p> <ol style="list-style-type: none"> 1. Person 2. Animal 3. Fixed object (describe)* 4. Motor vehicle 5. Rail vehicle 6. Other (describe)*.
03	Collision Location	Drop-Down menu selection.	<p>Select the collision location that most closely describes the site at which the collision took place from the Drop-Down menu:</p> <ol style="list-style-type: none"> 1. Revenue facility: Transit center 2. Revenue facility: Platform 3. Revenue facility: Other (describe)* 4. Non-revenue facility 5. Right-of-way (ROW) / roadway: Grade crossing 6. Right-of-way (ROW) / roadway: Intersections 7. Right-of-way (ROW) / roadway: Other (describe)* 8. Commercial property 9. Other (describe)*.
04	Collision Description		Use this text box to provide additional incident information not captured on the Drop-Down menus.
05	a - f Fatalities		Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others killed due to a collision .
06	a - f Injuries		Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others receiving injuries due to a collision .
07	Total Estimated Property Damage		Enter the estimated dollar amount required to repair or replace all vehicles or public or private property / facilities involved in the incident to a state equivalent to that which existed prior to the incident.
Security Incident Detail — Primary Incidents			
01	Security Incident Type	Drop-Down menu selection.	<p>Select the security incident type from the Drop-Down menu:</p> <ol style="list-style-type: none"> 1. Aggravated assault

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Completing the Major Incident Report form (S&S-40) Rail			
			<ol style="list-style-type: none"> Arson Bombing Bomb threat Burglary Chemical or biological release Cyber incident Forcible rape Hijacking Homicide Larceny / theft Motor vehicle theft Robbery Sabotage Vandalism
02	Security Incident Location	Drop-Down menu selection.	Select the appropriate security location from the Drop-Down menu: <ol style="list-style-type: none"> Revenue facility: Transit center Revenue facility: Platform Revenue facility: Other (describe)* Non-revenue facility Right-of-way (ROW) / roadway: Grade crossing Right-of-way (ROW) / roadway: Intersection Right-of-way (ROW) / roadway: Other (describe)* Commercial property Other (describe)*.
04	Security Description		Use this text box to provide additional incident information not captured on the Drop-Down menus.
05	a - f Fatalities		Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others killed due to a security incident.
06	a - f Injuries		Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others receiving injuries due to a security incident.
07	Total Estimated Property Damage		Enter the estimated dollar amount required to repair or replace all vehicles or public or private property / facilities involved in the incident to a state equivalent to that which existed prior to the incident.
Derailment Detail — Primary and Secondary Incidents			
01	Derailment Type	Drop-Down menu selection.	From the Drop-Down menu select the derailment type that best describes the incident: <ol style="list-style-type: none"> Going straight Proceeding through switch Stopping / starting Negotiating a curve Other (describe)*.
02	Derailment Location	Drop-Down menu selection.	Enter the location of the derailment using the Drop-Down menu: <ol style="list-style-type: none"> Switch

Completing the Major Incident Report form (S&S-40) Rail

			2. Curve 3. Tangent track .
03	Derailment Description		Use this text box to provide additional incident information not captured on the Drop-Down menus.
04	a - f Fatalities		Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others killed due to a derailment .
05	a - f Injuries		Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others receiving injuries due to a derailment .
06	Total Estimated Property Damage		Enter the estimated dollar amount required to repair or replace all vehicles or public or private property / facilities involved in the incident to a state equivalent to that which existed prior to the incident.
Evacuation Detail — Primary and Secondary Incidents			
01	Evacuation Type	Drop-Down menu selection.	Select the event that caused the evacuation from the Drop-Down menu: 1. Bombing 2. Chemical / biological / radiological release 3. Hijacking 4. Sabotage 5. Fire / smoke 6. Hazardous material 7. Other (describe)*.
02	Evacuation Location	Drop-Down menu selection.	Enter the location of the evacuation using the Drop-Down menu: 1. Revenue facility: Transit center 2. Revenue facility: Platform 3. Revenue facility: Other (describe)* 4. Non-revenue facility 5. Right of way (ROW) / roadway: Grade crossing 6. Right of way (ROW) / roadway: Intersection 7. Commercial property 8. Other (describe)*.
03	Evacuation Description		Use this text box to provide additional incident information not captured on the Drop-Down menus.
04	Fuel Type	Drop-Down menu selection.	If the evacuation was related to fuel, enter the fuel type from the Drop-Down menu: 1. Not applicable 2. Bio-diesel (BD) 3. Bunker fuel (BF) 4. Compressed natural gas (CNG) 5. Diesel fuel (DF) 6. Dual fuel (DU) 7. Electric battery (EB) 8. Electric propulsion (EP) 9. Ethanol (ET) 10. Gasoline (GA)

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Completing the Major Incident Report form (S&S-40) Rail

			11. Hybrid diesel (HD) 12. Hybrid gasoline (HG) 13. Grain additive (GR) 14. Kerosene (KE) 15. Liquefied natural gas (LNG) 16. Liquefied petroleum gas (LPG) 17. Methanol (MT) 18. Other (OR) (describe)*.
05	a - f	Fatalities	Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others killed due to an evacuation .
06	a - f	Injuries	Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others receiving injuries due to an evacuation .
07		Total Estimated Property Damage	Enter the estimated dollar amount required to repair or replace all vehicles or public or private property / facilities involved in the incident to a state equivalent to that which existed prior to the incident.
Fire Event Detail — Primary and Secondary Incidents			
01	Fire Details	Drop-Down menu selection.	Provide information, using the Drop-Down menu, on the nature of the fire : 1. Fuel 2. Cable 3. Other electrical (describe)* 4. Smoking materials (i.e., cigarettes) 5. Battery 6. Other (describe)*.
02	Fire Location	Drop-Down menu selection.	Select the appropriate location from the Drop-Down menu: 1. In vehicle 2. Revenue facility: Transit center 3. Revenue facility: Platform 4. Revenue facility: Other (describe)* 5. Non-revenue facility 6. Right-of-way (ROW) / roadway: Grade crossing 7. Right-of-way (ROW) / roadway: Intersection 8. Right-of-way (ROW) / roadway: Other 9. Other (describe)*.
03	Fire Description		Use this text box to provide additional incident information not captured on the Drop-Down menus.
04	Fuel Type	Drop-Down menu selection.	If the fire was related to fuel, enter the fuel type from the Drop-Down menu: 1. Not applicable 2. Bio-diesel (BD) 3. Bunker fuel (BF) 4. Compressed natural gas (CNG) 5. Diesel fuel (DF) 6. Dual fuel (DU)

Completing the Major Incident Report form (S&S-40) Rail

			7. Electric battery (EB) 8. Electric propulsion (EP) 9. Ethanol (ET) 10. Gasoline (GA) 11. Hybrid diesel (HD) 12. Hybrid gasoline (HG) 13. Grain additive (GR) 14. Kerosene (KE) 15. Liquefied natural gas (LNG) 16. Liquefied petroleum gas (LPG) 17. Methanol (MT) 18. Other (OR) (describe)*.
05	a - f	Fatalities	Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others killed due to a fire .
06	a - f	Injuries	Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others receiving injuries due to a fire .
07		Total Estimated Property Damage	Enter the estimated dollar amount required to repair or replace all vehicles or public or private property / facilities involved in the incident to a state equivalent to that which existed prior to the incident.
Not Otherwise Classified (NOC) Detail			
01		Incident Type	Drop-Down menu selection. One of the types of not otherwise classified (NOC) incidents is selected from the Drop-Down menu: 1. Slip and fall 2. Electric shock 3. Other (describe)*.
02		NOC Location	Drop-Down menu selection. Use the Drop-Down menu to describe where the incident took place: 1. Boarding / alighting 2. In revenue facility: Associated with elevators 3. In revenue facility: Associated with escalators 4. In revenue facility: Ramps 5. In revenue facility: Stairways 6. In revenue facility: Platform / stop / waiting areas 7. In revenue facility: Other (describe)* 8. In non-revenue location: Parking facility 9. In non-revenue location: In yard or other non-revenue area 10. Other location (describe)*.
03		NOC Description	Use this text box to provide additional incident information not captured on the Drop-Down menus.
04	a - f	Fatalities	Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others killed due to a not otherwise classified (NOC) incident.
05	a - f	Injuries	Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others receiving injuries due to a not

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Completing the Major Incident Report form (S&S-40) Rail

		otherwise classified (NOC) incident.
06	Estimated Property Damage	Enter the estimated dollar amount required to repair or replace all vehicles or public or private property / facilities involved in the incident to a state equivalent to that which existed prior to the incident.

Saving the Major Incident Report form (S&S-40)

Click on the **Save** button prior to exiting the form and continuing with the report. Click the **Submit Report** button to submit the form. If there are no major incidents for the reporting period for a particular mode and type of service (TOS), select the **Non-Major Summary Report form (S&S-50)** for that mode and type of service (TOS) and check the **No Major Incident Data to Report** box.

Click on the **Close** button at the bottom of the screen to close the form without saving.

Deleting a Major Incident Report form (S&S-40)

If a Major Incident Report form (S&S-40) is created in error, the form may be deleted by the Safety and Security Contact person. Open the unneeded form and scroll to the bottom. Click the **Delete** button. A prompt will appear, asking if you want to delete the form. Click the **OK** button and another prompt will appear, asking for the reason for the deletion. Once the user enters a reason and presses the **OK** button, the form will be deleted.

Once the form is deleted, the user will automatically return to the **Safety and Security** tab.

Submitting the Major Incident Report form (S&S-40)

When all data have been entered into the form and verified for accuracy, click the **Submit Report** button to report the information to NTD.

Click on the **Close** button to return to the **Safety and Security** tab.

Home	e-File	Annual	Safety & Security	Reports	Communications	Sys Admin	Help
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Form Name: Major Incident Report form (S&S-40) Mode: Non-Rail except Ferryboat Service: [Close Form](#)

Incident Num:

Update User: **Update Date:** **Submit Date:** **Revision:**

1 **Mode / Service:**

2 **Date and Time of Incident**
Month* Day* Year* Hour* Minutes* AM/PM* Time Zone*

3 **Incident Location**
City* State* Longitude Latitude

Incident Categorization

4 **Primary Event** (Select one - appropriate detail screen will appear below)*
☐ a Collision
☐ b Security incident
☐ d Evacuation
☐ e Fire
☐ f Vehicle leaving roadway
☐ g Fatalities / Injuries not otherwise classified (NOC)

5 **Secondary Events** (Select all that apply - appropriate detail screen will appear below)
☐ a Collision
☐ c Evacuation
☒ d Fire
☐ e Vehicle leaving roadway

Additional Detail (complete if applicable)

7 **Grade Crossing Control**

8 **Intersection Controls**
Describe Other*

Environmental Conditions

9 **Weather**

10 **Traffic**

11 **Lighting**

12 **Right-of-way (ROW) / Roadway Conditions**

13 **Right-of-way (ROW) / Roadway Configuration**

14 **Right-of-way (ROW) / Roadway Type**
Describe Other*

15 **Vehicles Involved**

Vehicle 1 type* Vehicle 1 action* Delete ☐

Vehicle 1 manufacturer*

Describe Other*

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16 Pedestrians Involved [Add Pedestrian](#)

Pedestrian 1* Gender* Age range* Pedestrian 1 Action* Delete ☐

Describe Other*

17 Other Relevant Incident Information not Provided Elsewhere on this Form

Incident Primary and Secondary Event Summary

	a Transit Passengers	b Transit Facility Occupants	c Transit Employees	d Other Workers	e Trespassers	f Other
18 Fatalities	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
19 Injuries	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
20 Total Estimated Property Damage \$	<input type="text"/>					

21 Contact Information for Person Reporting Incident

Name* Phone*

Title* Email*

[Save](#) [Close](#) [Submit Report](#) [Print](#) [Delete](#)

Detailed Instructions for Non-Rail Modes

This section describes in detail how to complete each element of the Major Incident Report form (S&S-40) Non-Rail.

At the bottom of the Safety and Security tab click on the **Add Major Incident** button, this will take you to the **Add Major Incident** screen.

From the **Drop-Down** list select the mode / type of service for which you would like to report a major incident.

Click on the **Generate Form** button one time only for each form you wish to generate.

The software will return you to the **Safety and Security** tab screen and the new Major Incident form (S&S-40) will be listed.

To begin entering data, click on the new Major Incident form (S&S-40) for the appropriate mode and type of service to open the form.

As the form is being completed, changes should be saved by clicking the **Save** button frequently. When all data have been entered into the form and verified for accuracy, to submit the form to the Federal Transit Administration (FTA) click the **Submit Report** button. To close the form, click the **Close** button. Reports that are saved will appear in the list of current forms in the **Safety and Security** screen. To delete a form click the **Delete Report** button.

If the reporter wishes to amend a report after it has already been submitted (for example, if further data is obtained after form submission or the agency discovers an error in form content), open the Major Incident Report form (S&S-40) Non-Rail, make changes to the form needed and click on the **Submit Report** button. The revised form will be designated as Revision 1. Further revisions will be designated as 2, 3, 4, etc.

Fields marked with an asterisk (*) on the screen are mandatory, indicating that the forms cannot be saved or submitted unless these fields are complete. Please complete all of the fields that apply to the incident, however, whether marked with an asterisk or not.

Some information at the top of the Major Incident Report form (S&S-40) Non-Rail is pre-filled or captured when data are entered and saved on the form. Three data fields are pre-filled:

1. NTD ID number — the NTD identification number (NTD ID) is the four-digit number FTA assigned to your transit agency. Review to ensure your NTD ID is correct. Contact your NTD analyst immediately if there is a problem.
2. Agency name — legal name of the transit agency as entered in the NTD Urbanized Area Report.
3. Mode / type of service – determined when the form was generated.

Four data fields are captured when data are entered and saved on the form:

1. Update user — identifies the user identification of the reporter entering or modifying the data
2. Update date — identifies the date of entry or modification
3. Submit date — if this report has been previously submitted, identifies the date this action was performed
4. Revision number — the revision number of a Major Incident Report form (S&S-40) will be 0 (zero) the first time it is submitted. Each time the form is revised and resubmitted, the revision number is incremented by one.

Mode and Type of Service (TOS)

The mode and type of service (TOS) are determined when form was generated. This cannot be edited.

Date and Time of Incident

Report the date and time the incident occurred using the **Drop-Down** menus.

AM / PM menu selections:

AM
PM

Time zone menu selections:

1. Atlantic
2. Eastern
3. Central
4. Mountain
5. Pacific
6. Alaska
7. Hawaii

Incident Location

Describe where the incident occurred, including sufficient information to identify the incident location. Enter the city where the incident occurred. Select the appropriate state from the **Drop-Down** menu.

Latitude and Longitude

If known, report the latitude and longitude of the incident. Use degrees (dd) and minutes (mm.m) for latitude and degrees (ddd) and minutes (mm.m) for longitude. Also select north or south (latitude) and west or east (longitude) from the **Drop-Down** menus.

Example 20 — Latitude and Longitude

Latitude: N 40 24.1

Longitude: W 102 23.8

Incident Categorization

Often events such as [fires](#) or [evacuations](#) happen as the result of other occurrences (e.g., a collision). This section of the Major Incident Report form (S&S-40) Non-Rail requires that the reporter enumerate each of the events involved in an incident (e.g., collision, fire, derailment, evacuation) and categorize one event as a primary event and the remaining as secondary events.

Primary Event

The primary event is the first harmful occurrence in an incident. Select only one primary event from the incidents listed on the form by clicking on the appropriate box.

Primary Event Types:

- a. [Collision](#)
- b. [Security incident](#)
- d. [Evacuation](#)
- e. [Fire](#)
- f. [Vehicles leaving roadway](#)
- g. [Facility / injury not otherwise classified](#) (NOC)

When the **Incident Detail** button is selected, an incident detail screen appears. The instructions for these screens are provided at the end of this section.

Secondary Events

Secondary events are events that occur as a result of the primary event. Multiple secondary events may be selected by clicking on the relevant box(es). Information is completed for secondary events in the same manner as for primary events.

Secondary Event Types:

- a. Collision
- c. Evacuation
- d. Fire
- e. Vehicle leaving roadway

When the **Incident Detail** box is selected, an incident detail screen appears. The instructions for these screens are provided at the end of this section.

Example 21 — Incident Categorization

Example: Incident Involves One Event

A fatality occurs as a result of a homicide.

Solution: A Major Incident Report form (S&S-40) Non-Rail must be completed because a fatality occurred.

Homicide is a security incident and is selected as the primary event on the Major Incident Report form (S&S-40) Non-Rail.

Example: Incident Involves More than One Event

A bus (BU) collides with a passenger car at an intersection and subsequently leaves the roadway, then catches fire. All passengers are evacuated.

Solution: A Major Incident Report form (S&S-40) Non-Rail is completed because the incident occurred at an intersection and because it involved an evacuation.

Collision is selected as the primary event. Vehicle leaving roadway, fire, and evacuation are all selected as secondary events.

Grade Crossing Control

Select the grade crossing control that most closely describes the traffic control or other devices present in incidents related to [grade crossings](#). Complete only if incident occurred at a grade crossing.

Intersection Controls

Select the intersection control that most closely describes the traffic control device or person controlling traffic, if any, in use at the time of the incident. Complete only if incident occurred at an intersection.

Environmental Conditions

Complete a brief description of significant environmental details.

Weather

Report weather conditions as they relate to the incident, if weather conditions are relevant to the incident. For incidents occurring indoors (e.g. in a station) select **Not Applicable**.

Intersection Control menu selections:

1. Traffic signal
2. Police officer, flagman, or other individual
3. Stop sign
4. Yield sign
5. Other signs (describe)*
6. Crossing gate
7. No control device, individual, or sign
8. Other (describe)*

Grade Crossing Control menu selections:

1. Active devices: Gates (median barrier)
2. Active devices: Gates (no median barrier)
3. Active devices: Flashing lights
4. Active devices: Traffic signal
5. Active devices: Train approaching sign
6. Active devices: Quad gates
7. Passive devices: Stop sign
8. Passive devices: Cross bucks
9. No control device

Example 22 — Weather Condition Reporting

Example: Clear Weather / Safety Incident

A paratransit van leaves the roadway in clear weather conditions.

Solution: Select **Clear** since weather is relevant to safety incidents outdoors.

Example: Fog / Safety Incident

A paratransit van leaves the roadway in foggy conditions.

Solution: Select **Fog / Mist** since weather is relevant to safety incidents outdoors.

Example: Indoors Safety Incident

A passenger is killed as a result of an incident involving an elevator in a station.

Solution: Select **Other (describe)** and state that the incident happened indoors.

Weather Conditions menu selections:

1. Clear
2. Cloudy
3. Fog / mist
4. Rain
5. Snow or sleet
6. Other (describe)*

Traffic

Report whether traffic was heavy, medium, or light at the time and location of the incident, if applicable. This classification should be on prevailing local conditions using the following guidelines:

- Heavy traffic — similar to rush hour
- Medium — similar to midday and early evening, or
- Light — typical of late night.

Traffic menu selections:

1. Heavy
2. Medium
3. Light

Example 23 — Traffic Condition Reporting

Example: Rush Hour Incident

A bus is involved in a serious collision at rush hour at a busy intersection.

Solution: Select **Heavy** since it happened during rush hour.

Lighting menu selections:

1. Daylight
2. Dawn or dusk
3. Night

Lighting

Select the most applicable type of lighting that was present at the time of the incident. For incidents occurring indoors (e.g. in a station) select **Not Applicable**.

Right-of-Way (ROW) / Roadway Conditions

Select the condition of right-of-way (ROW) / roadway surface at the time of the incident.

Right-of-Way (ROW) / Roadway Configuration

Select the configuration of right-of-way (ROW) / roadway in which the incident occurred.

Right-of-Way (ROW) / Roadway Configuration menu selections:

1. Straight
2. Level
3. Downhill
4. Curve
5. Uphill

Right-of-Way (ROW) / Roadway Conditions menu selections:

1. Dry
2. Wet
3. Snow / slush
4. Ice
5. Gravel
6. Debris
7. Other (describe)*

Right-of-Way (ROW) / Roadway Type

Select the type of right-of-way (ROW) / roadway in which the incident occurred.

Environmental Conditions Description

If there is additional relevant information regarding the environmental conditions that cannot be described adequately using the **Drop-Down** menus, use the text field to provide details.

Right-of-Way (ROW) / Roadway Type menu selections:

1. Divided highway
2. Ramp
3. Bridge
4. Intersection / grade crossing
5. Tunnel
6. Private property

Vehicles Involved

This section of the Major Incident Report form (S&S-40) Non-Rail is used to identify the vehicles involved in the [major incident](#). For each vehicle involved in the incident, click the **Add Vehicle** button. When this button is clicked to input information about the transit vehicle, two fields will appear (vehicle type). This will allow the reporter to add information about their vehicle. If multiple vehicles are involved, continue to add vehicles until all vehicles have been entered into the system. The reporter will be asked to enter the vehicle type of all other vehicles involved in the incident.

If there are no vehicles involved in the incident (for example, in the case of a fire on a rail station platform), do not click the **Add Vehicle** button. No vehicle information is required.

Click the **Delete Vehicle** button to remove any excess vehicles that you may have selected. Complete the information for each field as described below.

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Vehicle Type

For each vehicle, select the type of vehicle involved from the **Drop-Down** menu.

The transit vehicle is always entered as the first vehicle. If multiple transit vehicles are involved in the incident, transit vehicles may be entered as other using the **Add Vehicle** button. Click the **Delete Vehicle** button to remove any excess vehicles that you may have selected.

Note that on the Major Incident Report form (S&S-40) Non-Rail, only non-rail modes will be listed in the **Drop-Down** menu for Vehicle 1. For any subsequent vehicles that are added, the **Drop-Down** menu will include all modes.

Vehicle Action

For each vehicle, select the action of the vehicle involved from the **Drop-Down** menu.

Vehicle Manufacturer

If a transit vehicle was selected as the **Vehicle Type**, the **Vehicle Manufacturer** drop-down will appear. For each transit vehicle involved, select a vehicle manufacturer from the **Drop-Down** menu.

Vehicle 1 Type menu selections:

1. Transit: [Articulated buses](#) (AB)
2. Transit: [Automobiles](#) (AO)
3. Transit: [Buses](#) (BU)
4. Transit: [Double decked buses](#) (DB)
5. Transit: [School buses](#) (SB)
6. Transit: [Taxicabs](#)
7. Transit: [Trolleybuses](#) (TB)
8. Transit: [Vans](#) (VN)
9. Transit: Non-revenue
10. Commercial: Highway
11. Other (describe)*

Vehicle Action menu selections:

1. Going straight
2. Proceeding through switch
3. Stopping / starting
4. Negotiating a curve
5. Other (describe)*

Example 24 — Vehicle Involved Type and Manufacturer

Example: A Bus (BU) is involved in collision with a passenger vehicle.

Solution: The first vehicle is entered as type **Transit: Bus**. On the corresponding vehicle manufacturer drop-down, **GIL - Gillig Corporation** is selected.

The second vehicle is entered as type **Personal: Passenger vehicle**.

Pedestrians Involved

This section of the Major Incident Report form (S&S-40) Non-Rail is used to describe the pedestrians involved in the major incident. Pedestrians include individuals on skateboards or scooters.

For each pedestrian involved in the incident, click the **Add Pedestrian** button. Each time this button is clicked, one field will appear (pedestrian description) that allows the reporter to add information about that pedestrian from a **Drop-Down** menu. If, for example, there were three pedestrians involved in the incident, click the **Add Pedestrian** button three times.

If there are no pedestrians involved in the incident (for example, in the case of a transit vehicle colliding with a passenger vehicle), do not click the **Add Pedestrian** button. No pedestrian information is required.

Click on the **Delete Pedestrian** button to remove any excess pedestrians that you may have selected.

Gender

For each pedestrian, select the gender of the person involved from the **Drop-Down** menu.

Pedestrian Gender menu selections:

Male
Female

Age Range

For each pedestrian, select the age range of the person involved from the **Drop-Down** menu.

Pedestrian Age Range menu selections:

1 – 5	26 – 35
6 – 12	36 – 45
13 – 17	46 – 60
18 – 25	over 60

Pedestrian Action

For each pedestrian, select the action of the person involved from the **Drop-Down** menu.

Other Relevant Incident Information not Provided Elsewhere on this Form

The following information appears below **Additional Detail** (complete if applicable).

Incident Primary and Secondary Event Summary

This section automatically totals key data reported in the incident detail forms for the primary and secondary events. The key data are:

- [Fatalities](#) by type of individual involved,
- [Injuries](#) by type of individual involved, and
- Total estimated [property damage](#).

The instructions for the incident detail forms are provided at the end of this section.

Contact Information for Person Reporting Incident

FTA may need to contact the individual completing the form or another agency-designated contact concerning details that may not be clear, or to further clarify data. Provide the following information for an agency contact for the Major Incident Report form (S&S-40) Non-Rail: name, title, phone number, and e-mail address.

Primary and Secondary Incident Detail Screens

This section describes the screens that appear when the **Detail** buttons are clicked under either primary event or secondary event. The screens include:

- [Collision](#) detail
- [Security incident](#) detail
- [Evacuation](#) detail
- [Fire](#) event detail
- [Vehicles leaving roadway](#) detail
- [Fatalities / injuries not otherwise classified](#) (NOC) detail.

Pedestrian Action menu selections:

1. Not Applicable
2. Crossing / entering roadway: In crosswalk
3. Crossing / entering roadway: Not in crosswalk
4. On roadway / right-of-way (ROW)
5. Other (describe)*

Collision Event Detail						
01 Collision impact type*	Make Selection					
02 Collision with*	Make Selection					
03 Collision location*	Make Selection					
04 Collision description						
	a	b	c	d	e	f
	Transit Passengers	Transit Facility Occupants	Transit Employees	Other Workers	Trespassers	Other
05 Fatalities						
06 Injuries						
07 Estimated Property Damage \$						

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Primary and Secondary Collision Detail Screen

When the **Collision** box is clicked under primary event, a **Collision Detail** screen appears. The following information must be completed.

Collision ImpactType

[Collision](#) impact type describes the orientation of the vehicles involved in a collision. If the transit vehicle is involved in a [collision with another vehicle](#), select the orientation — front, back, angle, sideswipe — that is most appropriate for the collision in the **Drop-Down** menu.

Each choice is from the point of view of the transit vehicle. That is, back means that another vehicle hit the back of the transit vehicle.

Collision Impact Type menu selections:

1. Front
2. Back
3. Angle
4. Sideswipe
5. Other (describe)*

Example 25 — Collision Impact Type Reporting

Example: Rear-End Collision

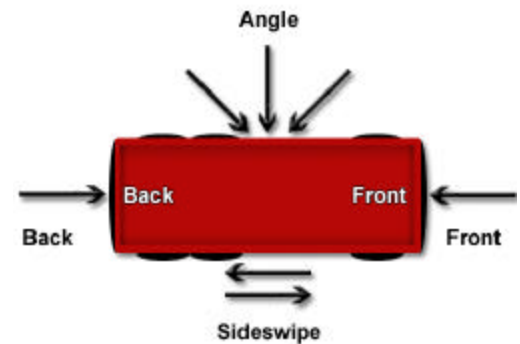
A trolleybus (TB) is rear-ended.

Solution: Select **Back**

Example: Head On Collision

A Bus (BU) strikes a utility pole head on (i.e., with the front of the bus).

Solution: Select **Front** because the incident involved the front of the bus striking a stationary object.



Collision With

Use this **Drop-Down** menu to specify the object or person (other than the transit vehicle) that is involved in the collision.

Collision With menu selections:

1. Person
2. Animal
3. Fixed object (describe)*
4. Motor vehicle
5. Other (describe)*

Example 26 — Reporting Collision With

Example: Collision with a Fire Hydrant

A demand response (DR) vehicle hits a fire hydrant. As a result, the operator and two passengers are injured seriously enough as to require immediate transport to a nearby hospital.

Solution: The three injuries require the completion of a Major Incident Report form (S&S-40).

For **Collision With** select: **With object: Other object** and note in the field that the object struck was a fire hydrant.

Example: Collision with a Motorcycle

A trolleybus (TB) strikes a motorcyclist, who dies three days after transport to hospital due to injuries sustained in this incident.

Solution: The fatality requires the completion of a Major Incident Report form (S&S-40).

For **Collision With** select: **With vehicle: Motor vehicle**.

Collision Location

Select the collision location that most closely describes the site at which the collision took place. If a situation occurs that cannot be described adequately using one of these **Drop-Down** menu options, use the **Other (Describe)*** field to provide details.

Collision Description

Use this box to provide details of the [collision](#), including any information that offers further specification not provided in the **Drop-Down** menus.

Fatalities and Injuries

Enter the numbers of [transit passengers](#), [transit facility occupants](#), [transit employees](#), [other workers](#), [trespassers](#), and [others](#) killed or receiving [injuries](#) due to a collision.

Estimated Property Damage

Enter the estimated dollar amount required to repair or replace all vehicles (including transit revenue and non-revenue and non-transit vehicles) or public or private property / facilities (including track, signals, buildings, and private facilities damaged) involved in the incident to a state equivalent to that which existed prior to the incident.

[Property damage](#) includes but is not limited to the following:

- Transit and non-transit vehicle damage
- Stations as well as non-transit facilities
- Rights-of-way (ROW) and items surrounding rights-of-way (ROW), such as utility poles
- Bus stops
- Maintenance facilities and other private property.

The key points regarding estimated property damage are:

- Estimated damage does not only include transit property damage but also damage to other vehicles and property (other than personal property) involved in the incident and not owned by the transit agency.
- The amount paid (or an estimate made for insurance purposes) is reported for property damage. In the case where replacement is necessary, the depreciated replacement cost is reported.
- The cost of clearing wreckage or damage to non-transit agency property is also included in the property damage value.
- The cost of an accident investigation is not included the estimated property damage.
- Damage to personal property, such as the value of laptops, cell phones, or other personal property items damaged or destroyed in an incident are not included estimated property damage.

Collision Location menu selections:

1. Revenue facility: Transit center
2. Revenue facility: Platform
3. Revenue facility: Other (describe)*
4. Non-revenue facility
5. Right-of-way (ROW) / roadway: Grade crossing
6. Right-of-way (ROW) / roadway: Intersection
7. Right-of-way (ROW) / roadway: Other (describe)*
8. Private property: Shopping center
9. Private property: Residential
10. Private property: Commercial
11. Private property: Nonprofit facility
12. Other (describe)*

Example 27 — Collision Property Damage

Example: A trolleybus (TB) collides with a passenger car. The passenger car is totaled; the trolleybus will require a new coupler and some bodywork. The car has an estimated value of \$8,000 (transit agency uses the car's blue book value or other reasonable estimate of present value). The cost of the coupler is \$30,000; other bodywork to the trolleybus is estimated at \$10,000

Solution: For property damage enter **\$48,000** (\$8,000 + \$30,000 + \$10,000).

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Security Incident Event Detail						
01 Security incident type*	<div>Make Selection</div>					
02 Security incident location*	<div>Make Selection</div>					
04 Security incident description	<div></div>					
	a	b	c	d	e	f
	Transit Passengers	Transit Facility Occupants	Transit Employees	Other Workers	Trespassers	Other
05 Fatalities	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
06 Injuries	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
07 Estimated Property Damage \$	<div></div>					

Primary Security Incident Detail Screen

[Security incidents](#) resulting in fatalities, forcible rape, confirmed terrorist / security events: bombings, chemical / biological / radiological / other release, cyber, hijacking, sabotage, two or more major injuries, or property damage equal to or exceeding \$25,000 are reported on the Major Incident Report form (S&S-40) Non-Rail. When the **Security Incident** button is clicked under primary event, the **Security Detail** screen appears.

Any security incidents not meeting the thresholds described above are to be reported within the Non-Major Summary Report form (S&S-50).

The consequences of security incidents (i.e., crimes) should not be reported as safety statistics. For example, injuries or deaths resulting from assaults, arsons, and homicides are not safety related; they are security incidents.

Security Incident Type menu selections:

- | | |
|-------------------------------------------------------------------------|-----------------------------------------|
| 1. Aggravated assault | 8. Forcible rape |
| 2. Arson | 9. Hijacking |
| 3. Bombing | 10. Homicide |
| 4. Bomb threat | 11. Larceny / theft |
| 5. Burglary | 12. Motor vehicle theft |
| 6. Chemical / biological / radiological / other release | 13. Robbery |
| | 14. Sabotage |
| | 15. Vandalism |

Security Incident Type

Select the security incident type from the **Drop-Down** menu. The list includes security incident types that can produce the threshold values for [major incident](#) reporting — a fatality due to the incident, two or more [injuries](#), or property damage equal to or exceeding \$25,000.

Care should be exercised in choosing the homicide selection. Homicide involves the willful killing of one or more human beings by another. It excludes deaths caused by negligence, suicides, accidental deaths and traffic fatalities. It also excludes attempts to kill and assaults to kill (i.e., assault to murder and attempted murder); these incidents are reported as aggravated assaults.

Security Incident Location

The security location is a description of where the incident took place. Select the appropriate security location from the **Drop-Down** menu.

Security Description

Use this box to provide details of the [security incident](#), including any information that offers further specification not provided in the **Drop-Down** menus.

Fatalities and Injuries

Enter the numbers of those [transit passengers](#), [transit facility occupants](#), [transit employees](#), [other workers](#), [trespassers](#), and [others](#) killed or receiving [injuries](#) due to a security incident.

Security Incident Location menu selections:

1. Revenue facility: Transit center
2. Revenue facility: Platform
3. Revenue facility: Other (describe)*
4. Non-revenue facility
5. Right-of-way (ROW) / roadway: Grade crossing
6. Right-of-way (ROW) / roadway: Intersection
7. Right-of-way (ROW) / roadway: Other (describe)*
8. Private property: Shopping center
9. Private property: Residential
10. Private property: Commercial
11. Private property: Nonprofit facility
12. Other (describe)*

Estimated Property Damage

Enter the estimated dollar amount required to repair or replace all vehicles (including transit revenue and non-revenue and non-transit vehicles) or public or private property / facilities (including track, signals, buildings, and private facilities damaged) involved in the incident to a state equivalent to that which existed prior to the incident.

Evacuation Event Detail						
01 Evacuation type*	Make Selection					
02 Evacuation location	Make Selection					
03 Evacuation description						
04 Fuel type	Make Selection					
	a	b	c	d	e	f
	Transit Passengers	Transit Facility Occupants	Transit Employees	Other Workers	Trespassers	Other
05 Fatalities	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
06 Injuries	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
07 Estimated Property Damage \$	<input type="text"/>					

Primary and Secondary Evacuation Detail Screen

When the **Evacuation** button is clicked under primary or secondary event, the **Evacuation Detail** screen appears. The following information must be completed.

Evacuation Type

Select the event from the **Drop-Down** menu that caused the [evacuation](#). If multiple events prompted an evacuation (e.g., smoke and a flammable fuel leak) select one evacuation type and note the others in the **Evacuation Description** box.

If a vehicle was evacuated because one of the situations in the **Drop-Down** menu was suspected (e.g., fuel leak was suspected), but later investigation shows did not occur (e.g., fluid turned out to be water), the event is not reported.

Evacuation Type menu selections:

1. [Bombing](#)
2. [Chemical / biological / radiological / other release](#)
3. [Hijacking](#)
4. [Sabotage](#)
5. [Fire](#) / smoke
6. Hazardous material
7. Other (describe)*

Example 28 — Evacuation Type Reporting

Example: Bus (BU) Fills with Smoke

A Bus (BU) begins to fill with smoke and is evacuated.

Solution: Select: **Due to fire / smoke**.

The choice due to flammable fuel was not selected. Though the ignition of flammable fuel is certainly a concern in cases of fire / smoke, flammable fuel only is selected in cases where there is a fuel leak or spill.

Evacuation Location

The evacuation location is a description of where the evacuation took place. Select the appropriate evacuation location from the **Drop-Down** menu.

Evacuation Description

Use this box to provide details of the evacuation incident, including any information that offers further specification not provided in the **Drop-Down** menus.

Evacuation Location menu selections:

1. Revenue facility: Transit center
2. Revenue facility: Platform
3. Revenue facility: Other (describe)*
4. Non-revenue facility
5. Right-of-way (ROW) / roadway: Grade crossing
6. Right-of-way (ROW) / roadway: Intersection
7. Private property: Shopping center
8. Private property: Residential
9. Private property: Commercial
10. Private property: Nonprofit facility
11. Other (describe)*

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Fuel Type

If the evacuation was related to fuel, select the appropriate fuel type from the **Drop-Down** menu.

Fatalities and Injuries

Enter the numbers of those [transit passengers](#), [transit facility occupants](#), [transit employees](#), [other workers](#), [trespassers](#), and [others](#) killed or receiving [injuries](#) due to an [evacuation](#) incident.

Estimated Property Damage

Enter the estimated dollar amount required to repair or replace all vehicles (including transit revenue and non-revenue and non-transit vehicles) or public or private property / facilities (including track, signals, buildings, and private facilities damaged) involved in the incident to a state equivalent to that which existed prior to the incident.

Fuel Type menu selections:

1. Not applicable
2. Bio-diesel (BD)
3. Bunker fuel (BF)
4. Compressed natural gas (CNG)
5. Diesel (DF)
6. Dual fuel (DU)
7. Electric battery (EB)
8. Electric propulsion (EP)
9. Ethanol (ET)
10. Gasoline (GA)
11. Hybrid diesel (HD)
12. Hybrid gasoline (HG)
13. Grain additive (GR)
14. Kerosene (KE)
15. Liquefied natural gas (LNG)
16. Liquefied petroleum gas (LPG)
17. Methanol (MT)
18. Other (OR) (describe)*

Fire Event Detail						
01 Fire details*	<input type="text" value="Make Selection"/>					
02 Fire location*	<input type="text" value="Make Selection"/>					
03 Fire description	<input type="text"/>					
04 Fuel type	<input type="text" value="Make Selection"/>					
	a	b	c	d	e	f
	Transit Passengers	Transit Facility Occupants	Transit Employees	Other Workers	Trespassers	Other
05 Fatalities	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
06 Injuries	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
07 Estimated Property Damage \$	<input type="text"/>					

Primary and Secondary Fire Event Detail Screen

When the **Fire Event** button is clicked under primary or secondary event, the **Fire Detail** screen appears. The following information must be completed.

Fire Event Details

Provide information, using the **Drop-Down** menu, on the nature of the [fire](#). The definition of fires requires that fire suppression personnel (e.g., fire fighters or in-house personnel) or equipment (e.g., fire extinguishers or hoses) be involved for the incident to be considered reportable. Arsons are not reported as fires, but as security incidents.

Fire Event Detail menu selections:

1. Fuel
2. Cable
3. Other electrical (describe)*
4. Smoking materials (i.e., cigarettes)
5. Battery
6. Other (describe)*

Example 29 — Fire Details

Example: A passenger drops a lit cigarette in a station. The fire causes extensive damage and requires fire suppression equipment to put out.

Solution: Select: **Smoking materials** (i.e., cigarettes)

Fire Location

The fire location is a description of where the incident took place. Select the appropriate location from the **Drop-Down** menu.

Fire Description

Use this box to provide details of the fire incident, including any information that offers further specification not provided in the **Drop-Down** menus.

Fuel Type

If the fire was related to fuel, select the appropriate fuel type from the **Drop-Down** menu.

Fatalities and Injuries

Enter the numbers of those [transit passengers](#), [transit facility occupants](#), [transit employees](#), [other workers](#), [trespassers](#), and [others](#) killed or receiving [injuries](#) due to a [fire](#).

Estimated Property Damage

Enter the estimated dollar amount required to repair or replace all vehicles (including transit revenue and non-revenue and non-transit vehicles) or public or private property / facilities (including track, signals, buildings, and private facilities damaged) involved in the incident to a state equivalent to that which existed prior to the incident.

Fire Location menu selections:

1. In vehicle
2. Revenue facility: Transit center
3. Revenue facility: Platform
4. Revenue facility: Other (describe)*
5. Non-revenue facility
6. Right-of-way (ROW) / roadway: Grade crossing
7. Right-of-way (ROW) / roadway: Intersection
8. Right-of-way (ROW) / roadway: Other (describe)*
9. Other (describe)*

Fuel Type menu selections:

- | | |
|---------------------------------|-----------------------------------|
| 1. Not applicable | 10. Gasoline (GA) |
| 2. Bio-diesel (BD) | 11. Hybrid diesel (HD) |
| 3. Bunker fuel (BF) | 12. Hybrid gasoline (HG) |
| 4. Compressed natural gas (CNG) | 13. Grain additive (GR) |
| 5. Diesel (DF) | 14. Kerosene (KE) |
| 6. Dual fuel (DU) | 15. Liquefied natural gas (LNG) |
| 7. Electric battery (EB) | 16. Liquefied petroleum gas (LPG) |
| 8. Electric propulsion (EP) | 17. Methanol (MT) |
| 9. Ethanol (ET) | 18. Other(OR) (describe)* |

Vehicle Leaving Roadway Event Detail						
01 Vehicles leaving roadway description	a	b	c	d	e	f
	Transit Passengers	Transit Facility Occupants	Transit Employees	Other Workers	Trespassers	Other
02 Fatalities	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
03 Injuries	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
04 Estimated Property Damage \$	<input type="text"/>					

Primary and Secondary Vehicle Leaving Roadway Detail Screen

When the **Vehicle Leaving Roadway** button is clicked under primary or secondary event, the **Vehicle Leaving Roadway** screen appears. The following information must be completed.

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Vehicles Leaving Roadway Description

Use this box to provide details of the [vehicle leaving roadway](#) incident.

Fatalities and Injuries

Enter the numbers of those [transit passengers](#), [transit facility occupants](#), [transit employees](#), [other workers](#), [trespassers](#), and [others](#) killed or receiving [injuries](#) due to the vehicle leaving roadway incident.

Estimated Property Damage

Enter the estimated dollar amount required to repair or replace all vehicles (including transit revenue and non-revenue and non-transit vehicles) or public or private property / facilities (including track, signals, buildings, and private facilities damaged) involved in the incident to a state equivalent to that which existed prior to the incident.

Fatalities/Injuries Not Otherwise Classified (NOC) Event Detail

01. Incident type*

02. NOC location

03. NOC description

	Transit Passengers	Transit Facility Occupants	Transit Employees	Other Workers	Trespassers	Other
04. Fatalities	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
05. Injuries	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
06. Estimated Property Damage \$	<input type="text"/>					

Primary Not Otherwise Classified (NOC) Detail Screen

When the **Not Otherwise Classified (NOC)** button is clicked under primary event, the **Not Otherwise Classified (NOC) Detail** screen appears. The following information must be completed.

Incident Type

One of the types of [not otherwise classified](#) (NOC) incidents is selected from the **Drop-Down** menu. If a situation occurs that cannot be described adequately using one of these **Drop-Down** menu selections, use the **Fatalities and Injuries Not Otherwise Classified Description** field to provide details.

Incident Type menu selections:

1. Slip and fall
2. Electric shock
3. Other (describe)*

Example 30 — Incident Type Reporting

Example: Abrupt Stop

A Bus (BU) stops abruptly in traffic. No collision occurs, but two passengers and the operator require immediate medical attention at a local hospital due to injuries sustained.

Solution: Select: **Slip and fall** for not otherwise classified (NOC) type.

NOC Location

The [not otherwise classified](#) (NOC) location is a description of where the incident took place.

If a situation occurs that cannot be described adequately using one of these **Drop-Down** menu options, use the **Fatalities and Injuries Not Otherwise Classified (NOC) Description** field to provide details.

Example 31 — Incident Location

Example: In Revenue Facility

A passenger is killed on an escalator.

Solution: Select In revenue facility: Associated with escalator for not otherwise classified (NOC) location.

Example: In Vehicle

An improperly secured wheelchair topples in a Bus (BU), injuring four passengers.

Solution: Select **In vehicle: Other in-vehicle: Securement issue** for not otherwise classified (NOC) location.

Not Otherwise Classified (NOC) Location menu selections:

1. In vehicle: Boarding / alighting: Level floor
2. In vehicle: Boarding / alighting: Low floor: Associated with ramp
3. In vehicle: Boarding / alighting: Low floor: Not associated with ramp
4. In vehicle: Boarding / alighting: Vehicle with stairs: Associated with lifts
5. In vehicle: Boarding / alighting: Vehicle with stairs: Not associated with lifts
6. In vehicle: Other in-vehicle: Securement issue
7. In vehicle: Other in-vehicle: Not a securement issue
8. In revenue facility: Associated with elevators
9. In revenue facility: Associated with escalators
10. In revenue facility: Ramps
11. In revenue facility: Stairways
12. In revenue facility: Platform / stop / waiting areas
13. In revenue facility: Other (describe)*
14. In non-revenue location: Parking facility
15. In non-revenue location: In yard or other non-revenue area
16. Other location: On right-of-way (ROW) / roadway
17. Other location: At other locations (describe)*

NOC Description

Use this box to provide details of the not otherwise classified (NOC) incident, including any information that offers further specification not provided in the **Drop-Down** menus.

Fatalities and Injuries

Enter the numbers of those [transit passengers](#), [transit facility occupants](#), [transit employees](#), [other workers](#), [trespassers](#), and [others](#) killed or receiving [injuries](#) due to the incident.

Estimated Property Damage

Enter the estimated dollar amount required to repair or replace all vehicles (including transit revenue and non-revenue and non-transit vehicles) or public or private property / facilities (including track, signals, buildings, and private facilities damaged) involved in the incident to a state equivalent to that which existed prior to the incident.

Line by Line Instructions for Non-Rail Modes

Completing the Major Incident Report form (S&S-40) Non-Rail

From the **Safety and Security** screen, click on **Add Major Incident** button.

Complete one Major Incident Report form (S&S-40) for each major incident following the instructions in this section.

At the bottom of the Safety and Security tab click on the **Add Major Incident** button, this will take you to the **Add Major Incident** screen.

Click on the **Generate Form** button one time only for each form you wish to generate.

The software will return you to the **Safety and Security** tab screen and the new Major Incident form (S&S-40) will be listed and highlighted.

To begin entering data, click on the new Major Incident form (S&S-40) for the appropriate mode and type of service to open the form.

The available modes / service options are determined by the data entered on the S&S-10.

Getting Help

Form Level Help: Click on the **Help** tab at the top of the screen for form level help.

A **Form Note** can be attached to any form. Use the **Add Form Note** link for relevant information to a specific field, to the entire form or to multiple forms. Click on the **Add Form Note** link at the top of the screen and enter your note on the **Notes** screen. You can review and / or edit a **Form Note** from the **Notes** tab.

#	Column	Item	Action	Instruction
01		Mode / Type of Service	Pre-filled — cannot be edited, review for accuracy.	Determined when form was generated.
02		Date and Time of Incident	Drop-Down menu selection.	Report the month, day, year, and time that the incident occurred from the Drop-Down menus.
03		Incident Location — City, State	Drop-Down menu selection.	Report the city and state where the incident occurred from the Drop-Down menus.
03		Incident Location — Latitude and Longitude	Drop-Down menu selection.	If known, report the latitude and longitude of the incident. Use degrees (dd) and minutes (mm.m) for latitude and degrees (ddd) and minutes (mm.m) for longitude. Also select north or south (latitude) and west or east (longitude) from the Drop-Down menus.
04		Incident Categorization — Primary Event	Checklist — select one.	Only one primary may be reported. Click on the corresponding Incident Detail button: a. Collision b. Security incident c. Evacuation d. Fire e. Vehicle leaving roadway f. Fatalities / injuries not otherwise classified (NOC).
05		Incident Categorization — Secondary Events	Checklist — select as many as apply.	Multiple secondary events may be reported. For each secondary event type click on the corresponding Incident Detail button: a. Collision b. Evacuation c. Fire d. Vehicle leaving roadway .
07		Additional Detail — Grade Crossing Control	Drop-Down menu selection.	Select the grade crossing control that most closely describes the traffic control or other devices present in incidents related to grade crossings from the Drop-Down menu: 1. Active devices: Gates (median barrier)

Completing the Major Incident Report form (S&S-40) Non-Rail

			<ol style="list-style-type: none"> Active devices: Gates (no median barrier) Active devices: Flashing lights Active devices: Traffic signal Active devices: Train approaching sign Active devices: Quad gates Passive devices: Stop sign Passive devices: Cross bucks No control device.
08	Additional Detail — Intersection Control	Drop-Down menu selection.	<p>Select the intersection control that most closely describes the traffic control device or person controlling traffic, if any, in use at the time of the incident from the Drop-Down menu:</p> <ol style="list-style-type: none"> Traffic signal Police officer, flagman, or other individual Stop sign Yield sign Other signs (describe)* Crossing gate No control device, individual, or sign Other (describe)*.
	Additional Detail — Describe Other		Use this text box to provide additional detail on rail alignment type, grade crossing controls, and intersection controls.
09	Environmental Conditions — Weather	Drop-Down menu selection.	<p>Select weather conditions as they relate to the incident, if weather conditions are relevant to the incident from the Drop-Down menu:</p> <ol style="list-style-type: none"> Clear Cloudy Fog / mist Rain Snow or sleet Other (describe)*.
10	Environmental Conditions — Traffic	Drop-Down menu selection.	<p>Select whether traffic was heavy, medium, or light at the time and location of the incident, if applicable from the Drop-Down menu:</p> <ol style="list-style-type: none"> Heavy Medium Light.
11	Environmental Conditions — Lighting	Drop-Down menu selection.	<p>Select the most applicable type of lighting that was present at the time of the incident from the Drop-Down menu:</p> <ol style="list-style-type: none"> Daylight Dawn or dusk Night.
12	Environmental Conditions — Right-of-Way (ROW) / Roadway Conditions	Drop-Down menu selection.	<p>Select the condition of right-of-way (ROW) / roadway surface at the time of the incident from the Drop-Down menu:</p> <ol style="list-style-type: none"> Dry Wet Snow / slush

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Completing the Major Incident Report form (S&S-40) Non-Rail			
			4. Ice 5. Gravel 6. Debris 7. Other (describe)*.
13	Environmental Conditions — Right-of-Way (ROW) / Roadway Configuration	Drop-Down menu selection.	Select the alignment of right-of-way (ROW) / roadway in which the incident occurred from the Drop-Down menu: 1. Straight 2. Level 3. Downhill 4. Curve 5. Uphill.
14	Environmental Conditions — Right-of-Way (ROW) / Roadway Type	Drop-Down menu selection.	Select the type of right-of-way (ROW) / roadway in which the incident occurred from the Drop-Down menu: 1. Divided highway 2. Ramp 3. Bridge 4. Intersection / grade crossing 5. Tunnel 6. Private property.
	Environmental Conditions — Describe Other		Provide additional detail regarding environmental conditions if space is needed to clarify.
15	Vehicles Involved — Vehicle Type	Checklist — select one.	For each vehicle involved in the incident, click the Add Vehicle button. For each transit vehicle, select the type of vehicle involved from the Drop-Down menu. 1. Transit: Articulated buses (AB) 2. Transit: Automobiles (AO) 3. Transit: Buses (BU) 4. Transit: Double decked buses (DB) 5. Transit: School buses (SB) 6. Transit: Taxicabs 7. Transit: Trolleybuses (TB) 8. Transit: Vans (VN) 9. Transit: Non-revenue 10. Commercial: Highway 11. Other (describe)*. For each vehicle, supply an associated vehicle description. For any subsequent vehicles that are added, the Drop-Down menu will include all modes.
15	Vehicles Involved — Vehicle Action	Drop-Down menu selection.	For each transit vehicle, select the type of vehicle action from the Drop-Down menu. 1. Going straight 2. Proceeding through switch 3. Stopping / starting 4. Negotiating a curve 5. Other (describe)*.
15	Vehicles Involved —	Drop-Down menu	For each transit vehicle, select a manufacturer from the

Completing the Major Incident Report form (S&S-40) Non-Rail

	Vehicle Manufacturer	selection.	Drop-Down menu.
16	Pedestrians Involved — Pedestrian Description	Drop-Down menu selection.	For each pedestrian involved, click the Add Pedestrian button. For each pedestrian involved in the incident, complete the Drop-Down menus.
16	Pedestrians Involved — Pedestrian Action		For each pedestrian, select the type of pedestrian action from the Drop-Down menu. 1. Not applicable 2. Crossing / entering roadway: In crosswalk 3. Crossing / entering roadway: Not in crosswalk 4. On roadway / right of way (ROW) 5. Other (describe)*.
16	Pedestrians Involved — Describe Other		Provide additional detail regarding pedestrians if space is needed to clarify.
17	Other Relevant Incident Information not Provided Elsewhere on this Form		Complete a brief description of significant incident details not captured in other fields.
18	a - f Incident Primary and Secondary Event Summary — Fatalities	Auto-Calc field — cannot be edited.	This field displays the total number of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others killed due to the incident. This is the sum of the fatalities reported on the Incident Detail screens.
19	a - f Incident Primary and Secondary Event Summary — Injuries	Auto-Calc field — cannot be edited.	This field displays the total number of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others killed due to the incident. This is the sum of the injuries reported on the Incident Detail screens.
20	Incident Primary and Secondary Event Summary — Total Estimated Property Damage	Auto-Calc field — cannot be edited.	This field displays the total estimated dollar amount required to repair or replace all vehicles or public or private property / facilities involved in the incident to a state equivalent to that which existed prior to the incident. This is the sum of the estimated property damage reported on the Incident Detail screens.
21	Contact Information for Person Reporting Incident		Include information to allow follow-up FTA contact concerning details that may not be clear or to further clarify data.
Collision Detail — Primary and Secondary Incidents			
01	Collision Impact Type	Drop-Down menu selection.	If the transit vehicle is involved in a collision with another vehicle , select the orientation that is most appropriate for the collision in the Drop-Down menu: 1. Front 2. Back 3. Angle 4. Sideswipe 5. Other (describe)*.
02	Collision With	Drop-Down menu selection.	The Drop-Down menu is used to specify the object or person (other than the transit vehicle) that is involved in the collision : 1. Person

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Completing the Major Incident Report form (S&S-40) Non-Rail			
			2. Animal 3. Fixed object (describe)* 4. Motor vehicle 5. Other (describe)*.
03	Collision Location	Drop-Down menu selection.	Select the collision location that most closely describes the site at which the collision took place from the Drop-Down menu: 1. Revenue facility: Transit center 2. Revenue facility: Platform 3. Revenue facility: Other (describe)* 4. Non-revenue facility 5. Right-of-way (ROW) / roadway: Grade crossing 6. Right-of-way (ROW) / roadway: Intersection 7. Right-of-way (ROW) / roadway: Other (describe)* 8. Private property: Shopping center 9. Private property: Residential 10. Private property: Commercial 11. Private property: Non-profit facility 12. Other (describe)*.
04	Collision Description		Use this text box to provide additional incident information not captured on the Drop-Down menus.
05	a - f Fatalities		Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others killed due to a collision .
06	a - f Injuries		Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others receiving injuries due to a collision .
07	Estimated Property Damage		Enter the estimated dollar amount required to repair or replace all vehicles or public or private property / facilities involved in the incident to a state equivalent to that which existed prior to the incident.
Security Incident Detail — Primary Incidents			
01	Security Incident Type	Drop-Down menu selection.	Select the security incident type from the Drop-Down menu: 1. Aggravated assault 2. Arson 3. Bombing 4. Bomb threat 5. Burglary 6. Chemical / biological / radiological / other release 7. Cyber incident 8. Forcible rape 9. Hijacking 10. Homicide 11. Larceny / theft 12. Motor vehicle theft 13. Robbery 14. Sabotage 15. Vandalism

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02	Security Incident Location	Drop-Down menu selection.	<p>Select the appropriate security location from the Drop-Down menu:</p> <ol style="list-style-type: none"> 1. Revenue facility: Transit center 2. Revenue facility: Platform 3. Revenue facility: Other (describe)* 4. Non-revenue facility 5. Right-of-way (ROW) / roadway: Grade crossing 6. Right-of-way (ROW) / roadway: Intersection 7. Right-of-way (ROW) / roadway: Other (describe)* 8. Private property: Shopping center 9. Private property: Residential 10. Private property: Commercial 11. Private property: Non-profit facility 12. Other (describe)*.
04	Security Description		Use this text box to provide additional incident information not captured on the Drop-Down menus.
05	a - f Fatalities		Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others killed due to a security incident.
06	a - f Injuries		Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others receiving injuries due to a security incident.
07	Estimated Property Damage		Enter the estimated dollar amount required to repair or replace all vehicles or public or private property / facilities involved in the incident to a state equivalent to that which existed prior to the incident.
Evacuation Detail — Primary and Secondary Incidents			
01	Evacuation Type	Drop-Down menu selection.	<p>Select the event that caused the evacuation from the Drop-Down menu:</p> <ol style="list-style-type: none"> 1. Bombing 2. Chemical / biological / radiological / other release 3. Hijacking 4. Sabotage 5. Fire / smoke 6. Hazardous material 7. Other (describe)*.
02	Evacuation Location	Drop-Down menu selection.	<p>Enter the location of the evacuation using the Drop-Down menu:</p> <ol style="list-style-type: none"> 1. Revenue facility: Transit center 2. Revenue facility: Platform 3. Revenue facility: Other (describe)* 4. Non-revenue facility 5. Right-of-way (ROW) / roadway: Grade crossing 6. Right-of-way (ROW) / roadway: Intersection 7. Private property: Shopping center 8. Private property: Residential 9. Private property: Commercial 10. Private property: Non-profit facility

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			11. Other (describe)*.
03	Evacuation Description		Use this text box to provide additional incident information not captured on the Drop-Down menus.
04	Fuel Type	Drop-Down menu selection.	<p>If the evacuation was related to fuel, enter the fuel type from the Drop-Down menu:</p> <ol style="list-style-type: none"> 1. Not applicable 2. Bio-diesel (BD) 3. Bunker fuel (BF) 4. Compressed natural gas (CNG) 5. Diesel fuel (DF) 6. Dual fuel (DU) 7. Electric battery (EB) 8. Electric propulsion (EP) 9. Ethanol (ET) 10. Gasoline (GA) 11. Hybrid diesel (HD) 12. Hybrid gasoline (HG) 13. Grain additive (GR) 14. Kerosene (KE) 15. Liquefied natural gas (LNG) 16. Liquefied petroleum gas (LPG) 17. Methanol (MT) 18. Other (OR) (describe)*.
05	a - f	Fatalities	Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others killed due to an evacuation .
06	a - f	Injuries	Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others receiving injuries due to an evacuation .
07		Estimated Property Damage	Enter the estimated dollar amount required to repair or replace all vehicles or public or private property / facilities involved in the incident to a state equivalent to that which existed prior to the incident.
Fire Event Detail — Primary and Secondary Incidents			
01	Fire Details	Drop-Down menu selection.	<p>Provide information, using the Drop-Down menu, on the nature of the fire:</p> <ol style="list-style-type: none"> 1. Fuel 2. Cable 3. Other electrical (describe)* 4. Smoking materials (i.e., cigarettes) 5. Battery 6. Other (describe)*.
02	Fire Location	Drop-Down menu selection.	<p>Select the appropriate location from the Drop-Down menu:</p> <ol style="list-style-type: none"> 1. In vehicle 2. Revenue facility: Transit center 3. Revenue facility: Platform 4. Revenue facility: Other (describe)* 5. Non-revenue facility

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			6. Right-of-way (ROW) / roadway: Grade crossing 7. Right-of-way (ROW) / roadway: Intersection 8. Right-of-way (ROW) / roadway: Other 9. Other (describe)*.
03		Fire Description	Use this text box to provide additional incident information not captured on the Drop-Down menus.
04		Fuel Type	Drop-Down menu selection. If the fire was related to fuel, enter the fuel type from the Drop-Down menu: 1. Not applicable 2. Bio-diesel (BD) 3. Bunker fuel (BF) 4. Compressed natural gas (CNG) 5. Diesel fuel (DF) 6. Dual fuel (DU) 7. Electric battery (EB) 8. Electric propulsion (EP) 9. Ethanol (ET) 10. Gasoline (GA) 11. Hybrid diesel (HD) 12. Hybrid gasoline (HG) 13. Grain additive (GR) 14. Kerosene (KE) 15. Liquefied natural gas (LNG) 16. Liquefied petroleum gas (LPG) 17. Methanol (MT) 18. Other (OR) (describe)*.
05	a - f	Fatalities	Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others killed due to a fire .
06	a - f	Injuries	Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others receiving injuries due to a fire .
07		Estimated Property Damage	Enter the estimated dollar amount required to repair or replace all vehicles or public or private property / facilities involved in the incident to a state equivalent to that which existed prior to the incident.
Vehicle Leaving Roadway Detail — Primary and Secondary Incidents			
01		Vehicle Leaving Roadway Description	Use this text box to provide additional incident information not captured on the Drop-Down menus.
02	a - f	Fatalities	Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others killed as a result of a vehicle leaving roadway .
03	a - f	Injuries	Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others receiving injuries as a result of a vehicle leaving roadway .
04		Estimated Property Damage	Enter the estimated dollar amount required to repair or replace all vehicles or public or private property / facilities involved in the incident to a state equivalent to that which existed prior to the incident.

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Completing the Major Incident Report form (S&S-40) Non-Rail

Not Otherwise Classified (NOC) Detail

01	Incident Type	Drop-Down menu selection.	One of the types of not otherwise classified (NOC) incidents is selected from the Drop-Down menu: 1. Slip and fall 2. Electric shock 3. Other (describe)*.
02	NOC Location	Drop-Down menu selection.	Use the Drop-Down menu to describe where the incident took place: 1. In vehicle: Boarding / alighting: Level floor 2. In vehicle: Boarding / alighting: Low floor: Associated with ramp 3. In vehicle: Boarding / alighting: Low floor: Not associated with ramp 4. In vehicle: Boarding / alighting: Vehicle with stairs: Associated with lifts 5. In vehicle: Boarding / alighting: Vehicle with stairs: Not associated with lifts 6. In vehicle: Other in-vehicle: Securement issue 7. In vehicle: Other in-vehicle: Not a securement issue 8. In revenue facility: Associated with elevators 9. In revenue facility: Associated with escalators 10. In revenue facility: Ramps 11. In revenue facility: Stairways 12. In revenue facility: Platform / stop / waiting areas 13. In revenue facility: Other (describe)* 14. In non-revenue location: Parking facility 15. In non-revenue location: In yard or other non-revenue area 16. Other location: On right-of-way (ROW) / roadway 17. Other location (describe)*.
03	NOC Description		Use this text box to provide additional incident information not captured on the Drop-Down menus.
04	a - f	Fatalities	Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others killed due to a not otherwise classified (NOC) incident.
05	a - f	Injuries	Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others receiving injuries due to a not otherwise classified (NOC) incident.
06		Estimated Property Damage	Enter the estimated dollar amount required to repair or replace all vehicles or public or private property / facilities involved in the incident to a state equivalent to that which existed prior to the incident.

Saving the Major Incident Report form (S&S-40)

Click on the **Save** button prior to exiting the form and continuing with the report. Click the **Submit Report** button to submit the form. If there are no major incidents for the reporting period for a particular mode and type of service (TOS), select the **Non-Major Summary Report form (S&S-50)** for that mode and type of service (TOS) and check the **No Major Incident Data to Report** box.

Click on the **Close** button at the bottom of the screen to close the form without saving.

Deleting a Major Incident Report form (S&S-40)

If a Major Incident Report form (S&S-40) is created in error, the form may be deleted by the Safety and Security Contact person.

Completing the Major Incident Report form (S&S-40) Non-Rail

Open the unneeded form and scroll to the bottom. Click the **Delete** button. A prompt will appear, asking if you want to delete the form. Click the **OK** button and another prompt will appear, asking for the reason for the deletion. Once the user enters a reason and presses the **OK** button, the form will be deleted.

Once the form is deleted, the user will automatically return to the **Safety and Security** tab.

Submitting the Major Incident Report form (S&S-40)

When all data have been entered into the form and verified for accuracy, click the **Submit Report** button to report the information to NTD.

Click on the **Close** button to return to the **Safety and Security** tab.

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Home	e-File	Annual	Safety & Security	Reports	Communications	Sys Admin	Help							
Form Name: Major Incident Report form (S&S-40) Mode: Ferryboat Service: Close Form														
Incident Num:														
Update User:		Update Date:		Submit Date:		Revision:								
1 Mode / Service: <input type="text" value="Select"/>														
2 Date and Time of Incident														
Month*	<input type="text" value="Select"/>	Day*	<input type="text" value="Select"/>	Year*	<input type="text" value="Select"/>	Hour*	<input type="text" value="Select"/>	Minutes*	<input type="text" value="Select"/>	AM/PM*	<input type="text" value="Select"/>	Time Zone*	<input type="text" value="Select"/>	
3 Incident Location														
City*	<input type="text"/>			State*	<input type="text" value="Select"/>	Longitude	<input type="text"/>		<input type="text" value="Select"/>	Latitude	<input type="text"/>			<input type="text" value="Select"/>
Incident Categorization														
4 Primary Event (Select one - appropriate detail screen will appear below)*														
<input type="checkbox"/> a Collision														
<input type="checkbox"/> b Security incident														
<input type="checkbox"/> d Evacuation														
<input type="checkbox"/> e Fire														
<input type="checkbox"/> g Fatalities / Injuries not otherwise classified (NOC)														
5 Secondary Events (Select all that apply - appropriate detail screen will appear below)														
<input type="checkbox"/> a Collision														
<input type="checkbox"/> c Evacuation														
<input checked="" type="checkbox"/> d Fire														
Additional Detail (complete if applicable)														
8 Intersection Controls <input type="text" value="Make Selection"/>														
Describe Other* <input type="text"/>														
Environmental Conditions														
9 Weather <input type="text" value="Make Selection"/>														
10 Traffic <input type="text" value="Make Selection"/>														
11 Lighting <input type="text" value="Make Selection"/>														
12 Right-of-way (ROW) / Waterway Conditions <input type="text" value="Make Selection"/>														
Describe Other* <input type="text"/>														
15 Vehicles Involved <input type="button" value="Add Vehicle"/>														
Vehicle 1 type* <input type="text" value="Make Selection"/>														
Vehicle 1 action* <input type="text" value="Make Selection"/>														
Delete <input type="checkbox"/>														
Vehicle 1 manufacturer (specify model & year)* <input type="text"/>														
Describe Other* <input type="text"/>														
16 Pedestrians Involved <input type="button" value="Add Pedestrian"/>														
Pedestrian 1* Gender* <input type="text" value="Select"/>														
Age range* <input type="text" value="Select"/>														
Pedestrian 1 Action* <input type="text" value="Make Selection"/>														
Delete <input type="checkbox"/>														
Pedestrian 1 Description* <input type="text"/>														
17 Other Relevant Incident Information not Provided Elsewhere on this Form														
<input type="text"/>														

	a Transit Passengers	b Transit Facility Occupants	c Transit Employees	d Other Workers	e Trespassers	f Other
18 Fatalities	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
19 Injuries	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
20 Total Estimated Property Damage \$	<input type="text"/>					
21 Contact Information for Person Reporting Incident						
Name*	<input type="text"/>		Phone*	<input type="text"/>		
Title*	<input type="text"/>		Email*	<input type="text"/>		
<input type="button" value="Save"/> <input type="button" value="Close"/> <input type="button" value="Submit Report"/> <input type="button" value="Print"/> <input type="button" value="Delete"/>						

Detailed Instructions for Ferryboat Mode

This section describes in detail how to complete each element of the Major Incident Report form (S&S-40) Ferryboat.

At the bottom of the Safety and Security tab click on the **Add Major Incident** button, this will take you to the **Add Major Incident** screen.

From the **Drop-Down** list select the mode / type of service for which you would like to report a major incident.

Click on the **Generate Form** button one time only for each form you wish to generate.

The software will return you to the **Safety and Security** tab screen and the new Major Incident form (S&S-40) will be listed and highlighted.

To begin entering data, click on the new Major Incident form (S&S-40) for the appropriate mode and type of service to open the form.

As the form is being completed, changes should be saved by clicking the **Save** button frequently. When all data have been entered into the form and verified for accuracy, to submit the form to the Federal Transit Administration (FTA) click the **Submit Report** button. To close the form, click the **Close** button. Reports that are saved will appear in the list of current forms in the **Safety and Security** screen.

If the reporter wishes to amend a report after it has already been submitted (for example, if further data is obtained after form submission or the agency discovers an error in form content), open the Major Incident Report form (S&S-40) Ferryboat, make changes to the form needed and click on the **Submit Report** button. The revised form will be designated as Revision 1. Further revisions will be designated as 2, 3, 4, etc.

Fields marked with an asterisk (*) on the screen are mandatory, indicating that the forms cannot be saved or submitted unless these fields are complete. Please complete all of the fields that apply to the incident, however, whether marked with an asterisk or not.

Some information at the top of the Major Incident Report form (S&S-40) Ferryboat is pre-filled or captured when data are entered and saved on the form. Three data fields are pre-filled:

1. NTD ID number — the NTD identification number (NTD ID) is the four-digit number FTA assigned to your transit agency. Review to ensure your NTD ID is correct. Contact your NTD analyst immediately if there is a problem.
2. Agency name — legal name of the transit agency as entered in the NTD Urbanized Area Report
3. Mode / type of service — determined when the form was generated.

Four data fields are captured when data are entered and saved on the form:

1. Update user — identifies the user identification of the reporter entering or modifying the data
2. Update date — identifies the date of entry or modification
3. Submit date — if this report has been previously submitted, identifies the date this action was performed
4. Revision number — the revision number of a Major Incident Report form (S&S-40) Ferryboat will be 0 (zero) the first time it is submitted. Each time the form is revised and resubmitted, the revision number is incremented by one.

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Mode and Type of Service (TOS)

The mode and type of service (TOS) are determined when form was generated. This cannot be edited.

Date and Time of Incident

Report the date and time the incident occurred using the **Drop-Down** menus.

AM / PM menu selections:

AM
PM

Incident Location

Describe where the incident occurred, including sufficient information to identify the incident location. Enter the city where the incident occurred. Select the appropriate state from the **Drop-Down** menu.

Latitude and Longitude

If known, report the latitude and longitude of the incident. Use degrees (dd) and minutes (mm.m) for latitude and degrees (ddd) and minutes (mm.m) for longitude. Also select north or south (latitude) and west or east (longitude) from the **Drop-Down** menus.

Example 32 — Latitude and Longitude

Latitude: N 40 24.1

Longitude: W 102 23.8

Incident Categorization

Often events such as [fires](#) happen as the result of other occurrences (e.g., a collision). This section of the Major Incident Report form (S&S-40) Ferryboat requires that the reporter enumerate each of the events involved in an incident (e.g., collision, fire, derailment, evacuation) and categorize one event as a primary event and the remaining as secondary events.

Primary Event

The primary event is the first harmful occurrence in an incident. Select only one primary event from the incidents listed on the form by clicking on the appropriate box.

When the **Incident Detail** button is selected, an incident detail screen appears. The instructions for these screens are provided at the end of this section.

Primary Event Types:

- a. [Collision](#)
- b. [Security incident](#)
- d. [Evacuation](#)
- e. [Fire](#)
- f. [Facility / injury not otherwise classified \(NOC\)](#)

Secondary Events

Secondary events are events that occur as a result of the primary event. Multiple secondary events may be selected by clicking on the relevant box(es). Information is completed for secondary events in the same manner as for primary events.

When the **Incident Detail** box is selected, an incident detail screen appears. The instructions for these screens are provided at the end of this section.

Secondary Event Types:

- a. Collision
- c. Evacuation
- d. Fire

Intersection Controls

Select the intersection control that most closely describes the traffic control device or person controlling traffic, if any, in use at the time of the incident. Complete only if incident occurred at an intersection.

Intersection Control menu selections:

- 1. Traffic signal
- 2. Police officer, flagman, or other individual
- 3. Stop sign
- 4. Yield sign
- 5. Crossing gate
- 6. No control device, individual, or sign
- 7. Other (describe)*

Environmental Conditions

Complete a brief description of significant environmental details.

Weather

Report weather conditions as they relate to the incident, if weather conditions are relevant to the incident.

Example 33 — Weather Condition Reporting

Example: Clear Weather / Safety Incident

A ferryboat (FB) leaves the dock in clear weather conditions.

Solution: Select **Clear** since weather is relevant to safety incidents outdoors.

Example: Indoors Safety Incident

A passenger is killed as a result of an incident involving an elevator in a terminal center.

Solution: Select **Other (describe)** and state that the incident happened indoors.

Weather menu selections:

1. Clear
2. Cloudy
3. Fog / mist
4. Rain
5. Snow or sleet
6. Wind
7. Other (describe)*

Traffic

Report whether traffic was heavy, medium, or light at the time and location of the incident, if applicable. This classification should be on prevailing local conditions using the following guidelines:

- Heavy traffic — similar to rush hour
- Medium — similar to midday and early evening, or
- Light — typical of late night.

Traffic menu selections:

1. Heavy
2. Medium
3. Light

Lighting

Select the most applicable type of lighting that was present at the time of the incident.

Lighting menu selections:

1. Daylight
2. Dawn or dusk
3. Night

Right-of-Way (ROW) / Waterway Conditions

Select the condition of right-of-way (ROW) / waterway surface at the time of the incident.

Use the **Describe Other** text box to provide additional details about the right-of-way (ROW) / waterway conditions not provided in the **Drop-Down** menu.

Right-of-Way (ROW) / Waterway Conditions menu selections:

1. Tide: Low tide
2. Tide: Slack
3. Tide: High tide
4. Current: Slow
5. Current: Medium
6. Current: Fast
7. Other (describe)*

Vehicles Involved

This section of the Major Incident Report form (S&S-40) Ferryboat is used to identify the vehicles involved in the major incident. For each vehicle involved in the incident, click the **Add Vehicle** button. When this button is clicked to input information about the transit vehicle, two fields will appear (vehicle type). This will allow the reporter to add information about their vehicle. If multiple vehicles are involved, continue to add vehicles until all vehicles have been entered into the system. The reporter will be asked to enter the vehicle type of all other vehicles involved in the incident.

If there are no vehicles involved in the incident (for example, in the case of a fire on a rail station platform), do not click the **Add Vehicle** button. No vehicle information is required.

Click the **Delete Vehicle** button to remove any excess vehicles that you may have selected.

Vehicle Type

For each vehicle, select the type of vehicle involved from the **Drop-Down** menu.

The transit vehicle is always entered as the first vehicle. If multiple transit vehicles are

Vehicle 1 Type menu selections:

1. Transit: [Ferryboats](#) (FB)
2. Commercial: Marine
3. Other (describe)*

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involved in the incident, transit vehicles may be entered as other using the **Add Vehicle** button. Click the **Delete Vehicle** button to remove any excess vehicles that you may have selected.

Note that on the Major Incident Report form (S&S-40) Ferryboat, only ferryboat modes will be listed in the **Drop-Down** me

Example 34 — Vehicle Involved Type and Description

Example: A ferryboat (FB) is involved in collision with a fishing boat.

Solution:

The first vehicle is entered as type **Transit: Ferryboat**.

The second vehicle is entered as type **Commercial: Marine**.

Vehicle Action

For each vehicle, select the action of the vehicle involved from the **Drop-Down** menu.

Vehicle Manufacturer

If a transit vehicle was selected as the **Vehicle Type**, the **Vehicle Manufacturer** field will appear. Use this field to provide details (manufacturer, model, etc.) about the vehicle involved.

Vehicle Action menu selections:

1. Going straight
2. Stopping / starting
3. Negotiating a curve
4. Other (describe)*

Pedestrians Involved

This section of the Major Incident Report form (S&S-40) Non-Rail is used to describe the pedestrians involved in the major incident. Pedestrians include individuals on skateboards or scooters.

For each pedestrian involved in the incident, click the **Add Pedestrian** button. Each time this button is clicked, one field will appear (pedestrian description) that allows the reporter to add information about that pedestrian from a **Drop-Down** menu. If, for example, there were three pedestrians involved in the incident, click the **Add Pedestrian** button three times.

If there are no pedestrians involved in the incident (for example, in the case of a transit vehicle colliding with a passenger vehicle), do not click the **Add Pedestrian** button. No pedestrian information is required.

Click on the **Delete Pedestrian** button to remove any excess pedestrians that you may have selected.

Gender

For each pedestrian, select the gender of the person involved from the **Drop-Down** menu.

Age Range

For each pedestrian, select the age range of the person involved from the **Drop-Down** menu.

Pedestrian Action

For each pedestrian, select the action of the person involved from the **Drop-Down** menu.

Other Relevant Incident Information not Provided Elsewhere on this Form

The following information appears below **Additional Detail** (complete if applicable).

Incident Primary and Secondary Event Summary

This section automatically totals key data reported in the incident detail forms for the primary and secondary events. The key data are:

Pedestrian Gender menu selections:

Male
Female

Pedestrian Age Range menu selections:

1 – 5	26 – 35
6 – 12	36 – 45
13 – 17	46 – 60
18 – 25	over 60

Pedestrian Action menu selections:

1. Not applicable
2. In water
3. Other (describe)*

- [Fatalities](#) by type of individual involved,
- [Injuries](#) by type of individual involved, and
- Total estimated [property damage](#).

The instructions for the incident detail forms are provided at the end of this section.

Contact Information for Person Reporting Incident

FTA may need to contact the individual completing the form or another agency-designated contact concerning details that may not be clear, or to further clarify data. Provide the following information for an agency contact for the Major Incident Report form (S&S-40) Ferryboat: name, title, phone number, and e-mail address.

Collision Event Detail						
01 Collision impact type*	Make Selection					
02 Collision with*	Make Selection					
03 Collision location*	Make Selection					
04 Collision description						
	a	b	c	d	e	f
	Transit Passengers	Transit Facility Occupants	Transit Employees	Other Workers	Trespassers	Other
05 Fatalities						
06 Injuries						
07 Estimated Property Damage \$						

Primary and Secondary Incident Detail Screens

This section describes the screens that appear when the **Detail** boxes are checked under either primary event or secondary event. The screens include:

- [Collision](#) detail
- [Security incident](#) detail
- [Evacuation](#) detail
- [Fire](#) event detail
- [Fatalities / injuries not otherwise classified](#) (NOC) detail.

Primary and Secondary Collision Detail Screen

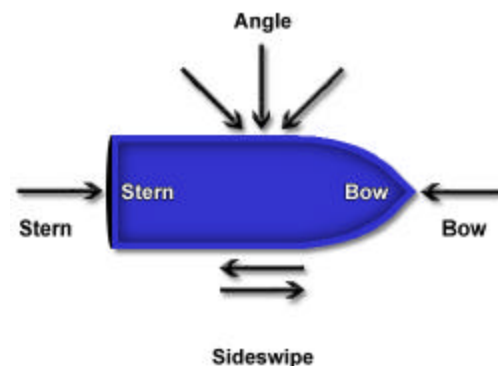
When the **Collision** box is checked under primary event, a **Collision Detail** screen appears. The following information must be completed.

Collision Impact Type

[Collision](#) impact type describes the orientation of the vehicles involved in a collision. If the transit vehicle is involved in a collision with another vehicle, select the orientation — front, back, angle, sideswipe — that is most appropriate for the collision in the **Drop-Down** menu.

Each choice is from the point of view of the transit vehicle. That is, back means that another vehicle hit the back of the transit vehicle.

If the transit vehicle strikes a fixed object rather than a vehicle, do not select an orientation; select fixed object.



Collision Impact Type menu selections:

1. Bow (front)
2. Stern (back)
3. Angle
4. Sideswipe
5. Other (describe)*

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Example 35 — Collision Impact Type Reporting

Example: Head On Collision

A ferryboat (FB) strikes a dock head on (i.e., with the front of the boat).

Solution: Select **Bow (front)** because the incident involved the front of the ferryboat striking the stationary object.

Collision With menu selections:

1. Person (pedestrian)
2. Animal
3. Fixed object (describe)*
4. Vessel
5. Other (describe)*

Collision With

Use this **Drop-Down** menu is to specify the object or person (other than the transit vehicle) that is involved in the collision.

Example 36 — Reporting Collision With

Example: Collision with a Dock

A ferryboat (FB) hits a dock. As a result, the operator and two passengers are injured seriously enough as to require immediate transport to a nearby hospital.

Solution: The three injuries require the completion of a Major Incident Report form (S&S-40).

For **Collision With** select: **Fixed Object** and note in the field that the object struck was a dock.

Collision Location menu selections:

1. Revenue facility: Terminal center
2. Revenue facility: Ramp / dock
3. Revenue facility: Other (describe)*
4. Non-revenue facility
5. Other (describe)*

Collision Location

Select the collision location that most closely describes the site at which the collision took place. If a situation occurs that cannot be described adequately using one of these **Drop-Down** menu options, use the **Collision Description** field to provide details.

Collision Description

Use this box to provide details of the [collision](#), including any information that offers further specification not provided in the **Drop-Down** menus.

Fatalities and Injuries

Enter the numbers of [transit passengers](#), [transit facility occupants](#), [transit employees](#), [other workers](#), [trespassers](#), and [others](#) killed or receiving [injuries](#) due to a collision.

Estimated Property Damage

Enter the estimated dollar amount required to repair or replace all vehicles (including transit revenue and non-revenue and non-transit vehicles) or public or private property / facilities (including track, signals, buildings, and private facilities damaged) involved in the incident to a state equivalent to that which existed prior to the incident.

[Property damage](#) includes but is not limited to the following:

- Transit and non-transit vehicle damage
- Stations as well as non-transit facilities
- Rights -of-way (ROW) and items surrounding rights -of-way (ROW), such as utility poles
- Maintenance facilities and other private property.

The key points regarding estimated property damage are:

- Estimated damage does not only include transit property damage but also damage to other vehicles and property (other than personal property) involved in the incident and not owned by the transit agency
- The amount paid (or an estimate made for insurance purposes) is reported for property damage. In the case where replacement is necessary, the depreciated replacement cost is reported

- The cost of clearing wreckage or damage to non-transit agency property is also included in the property damage value
- The cost of an accident investigation is not included the estimated property damage
- Damage to personal property, such as the value of laptops, cell phones, or other personal property items damaged or destroyed in an incident are not included estimated property damage.

Security Incident Event Detail						
01 Security incident type*	<div style="border: 1px solid black; padding: 2px;">Make Selection</div>					
02 Security incident location*	<div style="border: 1px solid black; padding: 2px;">Make Selection</div>					
04 Security incident description	<div style="border: 1px solid black; height: 20px;"></div>					
	a	b	c	d	e	f
	Transit Passengers	Transit Facility Occupants	Transit Employees	Other Workers	Trespassers	Other
05 Fatalities	<div style="border: 1px solid black; width: 80px; height: 20px;"></div>	<div style="border: 1px solid black; width: 80px; height: 20px;"></div>	<div style="border: 1px solid black; width: 80px; height: 20px;"></div>	<div style="border: 1px solid black; width: 80px; height: 20px;"></div>	<div style="border: 1px solid black; width: 80px; height: 20px;"></div>	<div style="border: 1px solid black; width: 80px; height: 20px;"></div>
06 Injuries	<div style="border: 1px solid black; width: 80px; height: 20px;"></div>	<div style="border: 1px solid black; width: 80px; height: 20px;"></div>	<div style="border: 1px solid black; width: 80px; height: 20px;"></div>	<div style="border: 1px solid black; width: 80px; height: 20px;"></div>	<div style="border: 1px solid black; width: 80px; height: 20px;"></div>	<div style="border: 1px solid black; width: 80px; height: 20px;"></div>
07 Estimated Property Damage \$	<div style="border: 1px solid black; width: 200px; height: 20px;"></div>					

Primary Security Incident Detail Screen

[Security incidents](#) resulting in fatalities due to an incident, forcible rape, confirmed terrorist / security events: bombings, chemical / biological / radiological / other release, cyber, hijacking, sabotage, two or more major injuries, or property damage equal to or exceeding \$25,000 are reported on the Major Incident Report form (S&S-40) Ferryboat. When the **Security Incident** button is clicked under primary event, the **Security Detail** screen appears.

Any security incidents not meeting the thresholds described above are to be reported within the Non-Major Summary Report form (S&S-50).

The consequences of security incidents (i.e., crimes) should not be reported as safety statistics. For example, injuries or deaths resulting from assaults, arsons, and homicides are not safety related; they are security incidents.

Security Incident Type

Select the security incident type from the **Drop-Down** menu. The list includes security incident types that can produce the threshold values for [major incident](#) reporting — a fatality due to an incident, two or more [injuries](#), or property damage equal to or exceeding \$25,000.

Care should be exercised in choosing the homicide selection. [Homicide](#) involves the willful killing of one or more human beings by another. It excludes deaths caused by negligence, suicides, accidental deaths and traffic fatalities. It also excludes attempts to kill and assaults to kill (i.e., assault to murder and attempted murder); these incidents are reported as aggravated assaults.

Security Incident Location

The security location is a description of where the incident took place. Select the appropriate security location from the **Drop-Down** menu.

Security Description

Use this box to provide details of the security incident, including any information that offers further specification not provided in the **Drop-Down** menus.

Security Incident Type menu selections:

1. [Aggravated assault](#)
2. [Arson](#)
3. [Bombing](#)
4. [Bomb threat](#)
5. [Burglary](#)
6. [Chemical / biological / radiological / other release](#)
7. [Cyber incident](#)
8. [Forcible rape](#)
9. [Hijacking](#)
10. [Homicide](#)
11. [Larceny / theft](#)
12. [Motor vehicle theft](#)
13. [Robbery](#)
14. [Sabotage](#)

Security Incident Location menu selections:

1. In vessel
2. Revenue facility: Terminal center
3. Revenue facility: Ramp / dock
4. Revenue facility: Other (describe)*
5. Non-revenue facility
6. Other (describe)*

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Fatalities and Injuries

Enter the numbers of those [transit passengers](#), [transit facility occupants](#), [transit employees](#), [other workers](#), [trespassers](#), and [others](#) or receiving [injuries](#) due to a security incident.

Estimated Property Damage

Enter the estimated dollar amount required to repair or replace all vehicles (including transit revenue and non-revenue and non-transit vehicles) or public or private property / facilities (including track, signals, buildings, and private facilities damaged) involved in the incident to a state equivalent to that which existed prior to the incident.

Evacuation Event Detail						
01 Evacuation type*	<div>Make Selection</div>					
02 Evacuation location	<div>Make Selection</div>					
03 Evacuation description	<div></div>					
04 Fuel type	<div>Make Selection</div>					
	a	b	c	d	e	f
	Transit Passengers	Transit Facility Occupants	Transit Employees	Other Workers	Trespassers	Other
05 Fatalities	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
06 Injuries	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
07 Estimated Property Damage \$	<div></div>					

Primary and Secondary Evacuation Detail Screen

When the **Evacuation** button is clicked under primary or secondary event, the **Evacuation Detail** screen appears. The following information must be completed.

Evacuation Type

Select the event from the **Drop-Down** menu that caused the [evacuation](#). If multiple events prompted an evacuation (e.g., smoke and a flammable fuel leak) select one evacuation type and note the others in the **Evacuation Description** box.

If a vehicle was evacuated because one of the situations in the **Drop-Down** menu was suspected (e.g., fuel leak was suspected), but later investigation shows did not occur (e.g., fluid turned out to be water), the event is not reported.

Evacuation Type menu selections:

1. Bombing
2. Chemical / biological / radiological / other release
3. Hijacking
4. Sabotage
5. Fire / smoke
6. Hazardous material
7. Other (describe)*

Example 37 — Evacuation Type Reporting

Example: Ferryboat (FB) Fills with Smoke

A ferryboat (FB) begins to fill with smoke and is evacuated.

Solution: Select: **Fire / smoke**.

Evacuation Location

The evacuation location is a description of where the evacuation took place. Select the appropriate evacuation location from the **Drop-Down** menu.

Evacuation Description

Use this box to provide details of the evacuation incident, including any information that offers further specification not provided in the **Drop-Down** menus.

Evacuation Location menu selections:

1. In vessel
2. Revenue facility: Terminal center
3. Revenue facility: Ramp / dock
4. Revenue facility: Other (describe)*
5. Non-revenue facility
6. Other (describe)*

Fuel Type

If the evacuation was related to fuel, select the appropriate fuel type from the **Drop-Down** menu.

Fuel Type menu selections:

1. Not applicable
2. Bio-diesel (BD)
3. Diesel (DF)
4. Electric propulsion (EP)
5. Gasoline (GA)
6. Other (OR) (describe)*

Fatalities and Injuries

Enter the numbers of those [transit passengers](#), [transit facility occupants](#), [transit employees](#), [other workers](#), [trespassers](#), and [others](#) killed or receiving [injuries](#) due to an evacuation incident.

Estimated Property Damage

Enter the estimated dollar amount required to repair or replace all vehicles (including transit revenue and non-revenue and non-transit vehicles) or public or private property / facilities (including track, signals, buildings, and private facilities damaged) involved in the incident to a state equivalent to that which existed prior to the incident.

Fire Event Detail						
01 Fire details*	Make Selection					
02 Fire location*	Make Selection					
03 Fire description						
04 Fuel type	Make Selection					
	a	b	c	d	e	f
	Transit Passengers	Transit Facility Occupants	Transit Employees	Other Workers	Trespassers	Other
05 Fatalities	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
06 Injuries	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
07 Estimated Property Damage \$	<input type="text"/>					

Primary and Secondary Fire Event Detail Screen

When the **Fire Event** box is checked under primary or secondary event, the **Fire Detail** screen appears. The following information must be completed.

Fire Details

Provide information, using the **Drop-Down** menu, on the nature of the [fire](#). The definition of fires requires that fire suppression personnel (e.g., fire fighters or in-house personnel) or equipment (e.g., fire extinguishers or hoses) be involved for the incident to be considered reportable. Arsons are not reported as fires, but as security incidents.

Fire Event Detail menu selections:

1. Fuel
2. Cable
3. Other electrical (describe)*
4. Smoking materials (i.e., cigarettes)
5. Battery
6. Other (describe)*

Example 38 — Fire Details

Example: A passenger drops a lit cigarette in a terminal. The fire causes extensive damage and requires fire suppression equipment to put out.

Solution: Select: **Smoking materials** (i.e., cigarettes)

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Fire Location

The fire location is a description of where the incident took place. Select the appropriate location from the **Drop-Down** menu.

Fire Description

Use this box to provide details of the fire incident, including any information that offers further specification not provided in the **Drop-Down** menus.

Fuel Type

If the fire was related to fuel, select the appropriate fuel type from the **Drop-Down** menu.

Fire Location menu selections:

1. In vessel
2. Revenue facility: Terminal center
3. Revenue facility: Ramp / dock
4. Revenue facility: Other (describe)*
5. Non-revenue facility
6. Other (describe)*

Fatalities and Injuries

Enter the numbers of those [transit passengers](#), [transit facility occupants](#), [transit employees](#), [other workers](#), [trespassers](#), and [others](#) killed or receiving [injuries](#) due to a fire.

Estimated Property Damage

Enter the estimated dollar amount required to repair or replace all vehicles (including transit revenue and non-revenue and non-transit vehicles) or public or private property / facilities (including track, signals, buildings, and private facilities damaged) involved in the incident to a state equivalent to that which existed prior to the incident.

Fuel Type menu selections:

1. Not applicable
2. Bio-diesel (BD)
3. Diesel (DF)
4. Electric propulsion (EP)
5. Gasoline (GA)
6. Other (OR) (describe)*

Fatalities/Injuries Not Otherwise Classified (NOC) Event Detail

01. Incident type*

02. NOC location

03. NOC description

	1	2	3	4	5	6
	Transit Passengers	Transit Facility Occupants	Transit Employees	Other Workers	Trespassers	Other
04. Fatalities	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
05. Injuries	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
06. Estimated Property Damage \$	<input type="text"/>					

Primary Not Otherwise Classified (NOC) Detail Screen

When the **Not Otherwise Classified (NOC)** button is clicked under primary event, the **Not Otherwise Classified (NOC) Detail** screen appears. The following information must be completed.

Incident Type

One of the types of [not otherwise classified](#) (NOC) incidents is selected from the **Drop-Down** menu. If a situation occurs that cannot be described adequately using one of these **Drop-Down** menu selections, use the **Fatalities and Injuries Not Otherwise Classified Description** field to provide details.

Incident Type menu selections:

1. Slip and fall
2. Electric shock
3. Other (describe)*

Example 39 — Incident Type Reporting

Example: Slip and Fall

A passenger in a ferryboat (FB) terminal slips on a puddle and falls down the stairs, breaking several bones.

Solution: Select: **Slip and Fall** for incident type.

Not Otherwise Classified Location

The [not otherwise classified](#) (NOC) location is a description of where the incident took place.

If a situation occurs that cannot be described adequately using one of these **Drop-Down** menu options, use the **Fatalities and Injuries Not Otherwise Classified (NOC) Description** field to provide details.

Example 40 — Incident Location

Example: In Revenue Terminal

A passenger is killed on an escalator.

Solution: Select **In revenue terminal: Escalators** for not otherwise classified (NOC) location.

Not Otherwise Classified (NOC) Location menu selections:

1. In vessel: Boarding / alighting: Ramp
2. In vessel: Boarding / alighting: Elevator
3. In vessel: Boarding / alighting: Stairs
4. In vessel: Boarding / alighting: Other (describe)*
5. In revenue terminal: Elevators
6. In revenue terminal: Escalators
7. In revenue terminal: Ramps
8. In revenue terminal: Stairways
9. In revenue terminal: Waiting areas
10. In revenue terminal: Other (describe)*
11. In non-revenue location: Parking facility
12. In non-revenue location: In yard or other non-revenue area
13. Other (describe)*

NOC Description

Use this box to provide details of the not otherwise classified (NOC) incident, including any information that offers further specification not provided in the **Drop-Down** menus.

Fatalities and Injuries

Enter the numbers of those [transit passengers](#), [transit facility occupants](#), [transit employees](#), [other workers](#), [trespassers](#), and [others](#) killed or receiving [injuries](#) due to an incident.

Estimated Property Damage

Enter the estimated dollar amount required to repair or replace all vehicles (including transit revenue and non-revenue and non-transit vehicles) or public or private property / facilities (including track, signals, buildings, and private facilities damaged) involved in the incident to a state equivalent to that which existed prior to the incident.

Line by Line Instructions for Ferryboat Mode

Completing the Major Incident Report form (S&S-40) Ferryboat

From the **Safety and Security** screen, click on **Add Major Incident** button.

Complete one Major Incident Report form (S&S-40) for each major incident following the instructions in this section.

At the bottom of the Safety and Security tab click on the **Add Major Incident** button, this will take you to the **Add Major Incident** screen.

Click on the **Generate Form** button one time only for each form you wish to generate.

The software will return you to the **Safety and Security** tab screen and the new Major Incident form (S&S-40) will be listed and highlighted.

To begin entering data, click on the new Major Incident form (S&S-40) for the appropriate mode and type of service to open the form.

The available modes / service options are determined by the data entered on the S&S-10.

Getting Help

Form Level Help: Click on the **Help** tab at the top of the screen for form level help.

A **Form Note** can be attached to any form. Use the **Add Form Note** link for relevant information to a specific field, to the entire form or to multiple forms. Click on the **Add Form Note** link at the top of the screen and enter your note on the **Notes** screen. You can review and / or edit a **Form Note** from the **Notes** tab.

#	Column	Item	Action	Instruction
01		Mode / Type of Service	Pre-filled — cannot be edited, review for accuracy.	Determined when form was generated.
02		Date and Time of Incident	Drop-Down menu selection.	Report the month, day, year, and time that the incident occurred from the Drop-Down menus.
03		Incident Location — City, State	Drop-Down menu selection.	Report the city and state where the incident occurred from the Drop-Down menus.
03		Incident Location — Latitude and Longitude	Drop-Down menu selection.	If known, report the latitude and longitude of the incident. Use degrees (dd) and minutes (mm.m) for latitude and degrees (ddd) and minutes (mm.m) for longitude. Also select north or south (latitude) and west or east (longitude) from the Drop-Down menus.
04		Incident Categorization — Primary Event	Checklist — select one.	Only one primary may be reported. Click on the corresponding Incident Detail button: a. Collision b. Security incident d. Evacuation e. Fire g. Fatalities / injuries not otherwise classified (NOC).
05		Incident Categorization — Secondary Events	Checklist — select as many as apply.	Multiple secondary events may be reported. For each secondary event type click on the corresponding Incident Detail button: a. Collision c. Evacuation d. Fire .
08		Additional Detail — Intersection Controls	Drop-Down menu selection.	Select the intersection control that most closely describes the traffic control device or person controlling traffic, if any, in use at the time of the incident from the Drop-Down menu: 1. Traffic signal 2. Police officer, flagman, or other individual 3. Stop sign 4. Yield sign

Completing the Major Incident Report form (S&S-40) Ferryboat

			<ol style="list-style-type: none"> Crossing gate No control device, individual, or sign Other (describe)*.
	Additional Detail — Describe Other		Use this text box to provide additional detail on intersection controls.
09	Environmental Conditions — Weather	Drop-Down menu selection.	<p>Select weather conditions as they relate to the incident, if weather conditions are relevant to the incident from the Drop-Down menu:</p> <ol style="list-style-type: none"> Clear Cloudy Fog / mist Rain Snow or sleet Wind Other (describe)*.
10	Environmental Conditions — Traffic	Drop-Down menu selection.	<p>Select whether traffic was heavy, medium, or light at the time and location of the incident, if applicable from the Drop-Down menu:</p> <ol style="list-style-type: none"> Heavy Medium Light.
11	Environmental Conditions — Lighting	Drop-Down menu selection.	<p>Select the most applicable type of lighting that was present at the time of the incident from the Drop-Down menu:</p> <ol style="list-style-type: none"> Daylight Dawn or dusk Night.
12	Environmental Conditions — Right-of-Way (ROW) / Waterway Conditions	Drop-Down menu selection.	<p>Select the condition of right-of-way (ROW) / roadway surface at the time of the incident from the Drop-Down menu:</p> <ol style="list-style-type: none"> Tide: Low tide Tide: Slack Tide: High tide Current: Slow Current: Medium Current: Fast Other (describe)*.
	Environmental Condition — Describe Other		Provide additional detail regarding environmental conditions if space is needed to clarify.
15	Incident Categorization — Vehicles Involved — Vehicle Type	Checklist — select one.	<p>For each vehicle involved in the incident, click the Add Vehicle button. For each transit vehicle, select the type of vehicle involved from the Drop-Down menu.</p> <ol style="list-style-type: none"> Transit: Ferryboats (FB) Commercial: Marine Other (describe)*. <p>For each vehicle, supply an associated vehicle description.</p> <p>For any subsequent vehicles that are added, the Drop-Down menu will include all modes.</p>
15	Vehicles Involved — Vehicle Action	Drop-Down menu selection.	For each transit vehicle, select the type of vehicle action from the Drop-Down menu.

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Completing the Major Incident Report form (S&S-40) Ferryboat			
			<ol style="list-style-type: none"> 1. Going straight 2. Stopping / starting 3. Negotiating a curve 4. Other (describe)*.
15	Vehicles Involved — Vehicle Manufacturer		For each transit vehicle, provide a brief description, including the manufacturer, model, etc.
16	Pedestrians Involved — Pedestrian Description	Drop-Down menu selection.	For each pedestrian involved, click the Add Pedestrian button. For each pedestrian involved in the incident, complete the Drop-Down menus.
16	Pedestrians Involved — Pedestrian Action		<p>For each pedestrian, select the type of pedestrian action from the Drop-Down menu.</p> <ol style="list-style-type: none"> 1. Not applicable 2. In water 3. Other (describe)*.
16	Pedestrians Involved — Describe Other		Provide additional detail regarding pedestrians if space is needed to clarify.
17	Other Relevant Incident Information not Provided Elsewhere on this Form		Provide a brief description of significant incident details not captured in other fields.
18	a - f Incident Primary and Secondary Event Summary — Fatalities	Auto-Calc field — cannot be edited.	This field displays the total number of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others killed due to an incident.
19	a - f Incident Primary and Secondary Event Summary — Injuries	Auto-Calc field — cannot be edited.	This field displays the total number of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others killed due to an incident.
20	Incident Primary and Secondary Event Summary — Total Estimated Property Damage	Auto-Calc field — cannot be edited.	This field displays the total estimated dollar amount required to repair or replace all vehicles or public or private property / facilities involved in the incident to a state equivalent to that which existed prior to the incident.
21	Contact Information for Person Reporting Incident		Include information to allow follow-up FTA contact concerning details that may not be clear or to further clarify data.
Collision Detail — Primary and Secondary Incidents			
01	Collision Impact Type	Drop-Down menu selection.	<p>If the transit vehicle is involved in a collision with another vehicle, select the orientation that is most appropriate for the collision in the Drop-Down menu:</p> <ol style="list-style-type: none"> 1. Bow (Front) 2. Stern (Back) 3. Angle 4. Sideswipe 5. Other (describe)*.
02	Collision With	Drop-Down menu selection.	<p>The Drop-Down menu is used to specify the object or person (other than the transit vehicle) that is involved in the collision:</p> <ol style="list-style-type: none"> 1. Person (pedestrian)

Completing the Major Incident Report form (S&S-40) Ferryboat

			<ol style="list-style-type: none"> Animal Fixed object (describe)* Vessel Other (describe)*.
03	Collision Location	Drop-Down menu selection.	<p>Select the collision location that most closely describes the site at which the collision took place from the Drop-Down menu:</p> <ol style="list-style-type: none"> Revenue facility: Terminal center Revenue facility: Ramp / dock Revenue facility: Other (describe)* Non-revenue facility Other (describe)*.
04	Collision Description		Use this text box to provide additional incident information not captured on the Drop-Down menus.
05	a - f	Fatalities	Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others killed due to a collision.
06	a - f	Injuries	Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others receiving injuries due to a collision.
07		Total Estimated Property Damage	Enter the estimated dollar amount required to repair or replace all vehicles or public or private property / facilities involved in the incident to a state equivalent to that which existed prior to the incident.
Security Incident Detail — Primary Incidents			
01	Security Incident Type	Drop-Down menu selection.	<p>Select the security incident type from the Drop-Down menu:</p> <ol style="list-style-type: none"> Aggravated assault Arson Bombing Bomb threat Burglary Chemical / biological / radiological / other release Cyber incident Forcible rape Hijacking Homicide Larceny / theft Motor vehicle theft Robbery Sabotage Vandalism
02	Security Incident Location	Drop-Down menu selection.	<p>Select the appropriate security location from the Drop-Down menu:</p> <ol style="list-style-type: none"> In vessel Revenue facility: Terminal center Revenue facility: Ramp / dock Revenue facility: Other (describe)* Non-revenue facility

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Completing the Major Incident Report form (S&S-40) Ferryboat			
			6. Other (describe)*.
04	Security Description		Use this text box to provide additional incident information not captured on the Drop-Down menus.
05	a - f Fatalities		Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others killed due to a security incident.
06	a - f Injuries		Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others receiving injuries due to a security incident.
07	Total Estimated Property Damage		Enter the estimated dollar amount required to repair or replace all vehicles or public or private property / facilities involved in the incident to a state equivalent to that which existed prior to the incident.
Evacuation Detail — Primary and Secondary Incidents			
01	Evacuation Type	Drop-Down menu selection.	Select the event that caused the evacuation from the Drop-Down menu: 1. Bombing 2. Chemical / biological / radiological / other release 3. Hijacking 4. Sabotage 5. Fire / smoke 6. Hazardous material 7. Other (describe)*.
02	Evacuation Location	Drop-Down menu selection.	Enter the location of the evacuation using the Drop-Down menu: 1. In vessel 2. Revenue facility: Terminal center 3. Revenue facility: Ramp / dock 4. Revenue facility: Other (describe)* 5. Non-revenue facility 6. Other (describe)*.
03	Evacuation Description		Use this text box to provide additional incident information not captured on the Drop-Down menus.
04	Fuel Type	Drop-Down menu selection.	If the evacuation was related to fuel, enter the fuel type from the Drop-Down menu: 1. Not applicable 2. Bio-diesel (BD) 3. Diesel fuel (DF) 4. Electric propulsion (EP) 5. Gasoline (GA) 6. Other (OR) (describe)*.
05	a - f Fatalities		Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others killed due to an evacuation .
06	a - f Injuries		Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others receiving injuries due to an evacuation .
07	Total Estimated Property Damage		Enter the estimated dollar amount required to repair or replace all vehicles or public or private property / facilities involved in the incident to a state equivalent to that which existed prior to the incident.

Completing the Major Incident Report form (S&S-40) Ferryboat

Fire Event Detail — Primary and Secondary Incidents

01	Fire Details	Drop-Down menu selection.	Provide information, using the Drop-Down menu, on the nature of the fire : 1. Fuel 2. Cable 3. Other electrical (describe)* 4. Smoking materials (i.e., cigarettes) 5. Battery 6. Other (describe)*.
02	Fire Location	Drop-Down menu selection.	Select the appropriate location from the Drop-Down menu: 1. In vessel 2. Revenue facility: Terminal center 3. Revenue facility: Ramp / dock 4. Revenue facility: Other (describe)* 5. Non-revenue facility 6. Other (describe)*.
03	Fire Description		Use this text box to provide additional incident information not captured on the Drop-Down menus.
04	Fuel Type	Drop-Down menu selection.	If the fire was related to fuel, enter the fuel type from the Drop-Down menu: 1. Not applicable 2. Bio-diesel (BD) 3. Diesel fuel (DF) 4. Electric propulsion (EP) 5. Gasoline (GA) 6. Other (OR) (describe)*.
05	a - f	Fatalities	Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others killed due to a fire .
06	a - f	Injuries	Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others receiving injuries due to a fire .
07		Total Estimated Property Damage	Enter the estimated dollar amount required to repair or replace all vehicles or public or private property / facilities involved in the incident to a state equivalent to that which existed prior to the incident.
Not Otherwise Classified (NOC) Detail			
01	Incident Type	Drop-Down menu selection.	One of the types of not otherwise classified (NOC) incidents is selected from the Drop-Down menu: 1. Slip and fall 2. Electric shock 3. Other (describe)*.
02	NOC Location	Drop-Down menu selection.	Use the Drop-Down menu to describe where the incident took place: 1. In vessel: Boarding / alighting: Ramp 2. In vessel: Boarding / alighting: Elevator 3. In vessel: Boarding / alighting: Stairs 4. In vessel: Boarding / alighting: Other (describe)* 5. In revenue terminal: Elevators

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Completing the Major Incident Report form (S&S-40) Ferryboat

			6. In revenue terminal: Escalators 7. In revenue terminal: Ramps 8. In revenue terminal: Stairways 9. In revenue terminal: Waiting areas 10. In revenue terminal: Other (describe)* 11. In non-revenue location: Parking facility 12. In non-revenue location: In yard or other non-revenue area 13. Other (describe)*.
03		NOC Description	Use this text box to provide additional incident information not captured on the Drop-Down menus.
04	a - f	Fatalities	Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others killed due to a not otherwise classified (NOC) incident.
05	a - f	Injuries	Enter the numbers of transit passengers , transit facility occupants , transit employees , other workers , trespassers , and others receiving injuries due to a not otherwise classified (NOC) incident.
06		Estimated Property Damage	Enter the estimated dollar amount required to repair or replace all vehicles or public or private property / facilities involved in the incident to a state equivalent to that which existed prior to the incident.

Saving the Major Incident Report form (S&S-40)

Click on the **Save** button prior to exiting the form and continuing with the report. Click the **Submit Report** button to submit the form. If there are no major incidents for the reporting period for a particular mode and type of service (TOS), select the **Non-Major Summary Report form (S&S-50)** for that mode and type of service (TOS) and check the **No Major Incident Data to Report** box.

Click on the **Close** button at the bottom of the screen to close the form without saving.

Deleting a Major Incident Report form (S&S-40)

If a Major Incident Report form (S&S-40) is created in error, the form may be deleted by the Safety and Security Contact person. Open the unneeded form and scroll to the bottom. Click the **Delete** button. A prompt will appear, asking if you want to delete the form. Click the **OK** button and another prompt will appear, asking for the reason for the deletion. Once the user enters a reason and presses the **OK** button, the form will be deleted.

Once the form is deleted, the user will automatically return to the **Safety and Security** tab.

Submitting the Major Incident Report form (S&S-40)

When all data have been entered into the form and verified for accuracy, click the **Submit Report** button to report the information to NTD.

Click on the **Close** button to return to the **Safety and Security** tab.